

A140000000361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

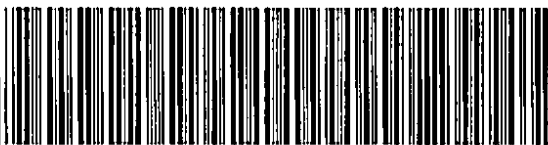
(Document Number)

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17 JUL 28 AM 11:49
TALLAHASSEE, FLORIDA

JUL 28 2017

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 11, 2017

STEPHEN DIGIOVANNI
16 DIAMOND DRIVE
KEY WEST, FL 33040 US

SUBJECT: ROTTEN RALPH'S OF KEY WEST, LLLP
Ref. Number: A14000000361

We have received your document for ROTTEN RALPH'S OF KEY WEST, LLLP and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LLC, but your entity is a LLLP. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 317A00013983

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ROTTEN RALPHS OF KEY WEST LLLP**

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

STEPHEN DIGIOVANNI

Contact Person

Firm/Company

16 DIAMOND DRIVE

Address

KEY WEST, FL 33040

City, State and Zip Code

BOBALOUSMM10@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN DIGIOVANNI at (**305**) **509-2992**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee ☐ \$61.25 Filing Fee and Certificate of Status ☐ \$105.00 Filing Fee and Certified Copy ☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

*81 52.50
Paid 30.00
Balance Due 22.50*

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:
 ROTTEN RALPHS OF KEY WEST, LLLP

2. The jurisdiction of its formation is: FLORIDA

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:
BOBALOUS MM10 KEY WEST LLLP

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

Business Address:

	<input type="checkbox"/> Add
	<input type="checkbox"/> Remove
	<input type="checkbox"/> Change
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6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

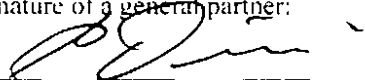
☐ The entity elects to be a limited liability limited partnership.

☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

STEPHEN DIGIOVANNI

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75