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(Requestor's Name)

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☐ PICK-UP

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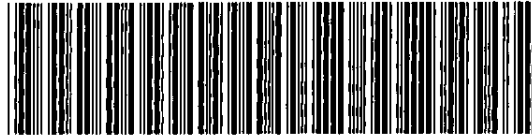
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

16 JUN 16 AM 7:14

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DEPARTMENT OF  
16 JUN 16 PM 3:28



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 16, 2016

FLORIDA FILING & SEARCH SERVICES INC

SUBJECT: JEWELRY ADDICTION, LP  
Ref. Number: W16000043599

RECEIVED  
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We have received your document for JEWELRY ADDICTION, LP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 316A00012714

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File Second

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**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 06-16-16**

**NAME: JEWELRY ADDICTION, LP**

**TYPE OF FILING: CERTIFICATE OF LIMITED PARTNERSHIP**

**COST: 1052.50**

**RETURN: CERTIFIED COPY PLEASE**

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**~~ACCOUNT: FC#0000000015~~**

**AUTHORIZATION: ~~ABRIE BAUGHN HODGE~~**

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FILE 2ND

**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Fashionista Enterprises, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.

2. 2048 Park Crescent Drive

(Street address of initial designated office)

Land O' Lakes, Florida 34639

3. Katherine Ann Reams

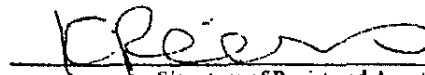
(Name of Registered Agent for Service of Process)

4. 2048 Park Crescent Drive

(Florida street address for Registered Agent)

Land O' Lakes, Florida 34639

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 2048 Park Crescent Drive

(Mailing address of initial designated office)

Land O' Lakes, Florida 34639

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

8. Name and business address of each general partner:

Name:

Fashionista Enterprises Management, LLC

Business Address:

2048 Park Crescent Dr.

Land O' Lakes, Florida 34639

\_\_\_\_\_

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16 JUN 16 AM 7:14  
SECRETARY OF STATE  
ALLAHAMSTE FLORIDA

9. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)*

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 2016.

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

\_\_\_\_\_

Fashionista Enterprises Management, LLC

\_\_\_\_\_

By: Katherine Ann Reama

\_\_\_\_\_

Name: Katherine Ann Reama

Title: President

**Filing Fees:**

**\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)**

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**

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