A1M000000211

(Requestor's Name)		
(Address)		
,		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(D		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
' 		
Special Instructions to Filing Officer:		
·		
Wing son 8		

Office Use Only



900298217429

05/02/17--01054--013 **1000.00

2011 MAY -2 PH 12: 25
SECRE FARY OF STATE
SALLAHASSEE FLORIDA

M. MILLIGAN MAY - 4 2017

CHARLES T. WEISS, P.A.

Law Offices
712 U.S. Highway One, Suite 301-2
North Palm Beach, FL 33408
E-Mail: ctw@WeissEstatePlanning.com

Telephone: (561) 848-9970

Facsimile: (561) 848-9961

April 27, 2017

File # 61104.000

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Filing of Certificate of Limited Partnership: Katyal Family Partnership, Ltd.

Dear Sir or Madam:

Please find enclosed the following documents for filing with the Florida Department of State:

- 1. Certificate of Limited Partnership of Katyal Family Partnership, Ltd., a Florida Limited Partnership; and
 - Certificate Designating Registered Agent.

Also enclosed is my Firm's check payable to the Florida Department of State totaling \$1,000 for the following fees:

- -Florida Limited Partnership Filing Fee of \$965; and
- -Designation of Agent of \$35.

Kindly return your confirmation letter indicating the acceptance of the filing (with the assigned document number, filed date, etc.) to me as soon as possible.

Thank you for your prompt assistance. Should you have any questions with regard to this request, please let me know.

Very truly, yours

Charles T. Weiss

CTW:sc Enclosures

Copy to:

Mr. Vipul Katyal

CERTIFICATE OF LIMITED PARTNERSHIP 2012 MAY OF KATYAL FAMILY PARTNERSHIP, LTD. ALLAMASSEE FLORIDA LIMITED PARTNERSHIP A FLORIDA LIMITED PARTNERSHIP

- 1. Name. The name of the Partnership is KATYAL FAMILY PARTNERSHIP, LTD.
- 2. <u>Business Address</u>. The principal place of business is 3111 Lake Ridge Lane, Weston, FL 33332.
- 3. Registered Agent. The Partnership has designated CHARLES T. WEISS as its Registered Agent.
- 4. <u>Street Address of Registered Agent</u>. The street address of the Registered Agent is 712 U.S. Highway One, Suite 301-2, North Palm Beach, Florida, 33408.
- 5. Acceptance by Registered Agent. Having been named to accept service of process for the above stated Limited Partnership, at the initial registered office of the Limited Partnership in this State, I hereby accept to act in this capacity and agree to comply with the provisions of any applicable statute related thereto.

By: CHARLES T. WEISS, Resident Agent

- 6. <u>Mailing Address</u>. The mailing address of the Partnership is 3111 Lake Ridge Lane, Weston, FL 33332.
- 7. <u>Termination</u>. The Partnership shall begin on date of filing of this Certificate with the Department of State and shall continue until December 31, 2045 unless sooner dissolved by law or by agreement of the parties hereto or unless extended by a majority agreement of the Partners.
 - 8. <u>The General Partner</u>. The name and addresse of the General Partner is:

General Partner	Address
KATYAL FAMILY PARTNERSHIP, LLC	3111 Lake Ridge Ln. Weston, FL 33332

IN WITNESS WHEREOF, the undersigned, as General Partners, have hereunto set their hands and seals this 4th day of April, 2017.

Signed, Sealed and Delivered in the presence of:

GENERAL PARTNER, KATYAL FAMILY PARTNERSHIP, LLC

By: SHALINI KATYAL, Managing Member

By: VIPUL KATYAL, Managing Member

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING REGISTERED AGENT UPON WHOM PROCESS MAY BE SERVED

The following is submitted pursuant to Chapter 620, Florida Statutes:

KATYAL FAMILY PARTNERSHIP, LTD., desiring to organize under the laws of the State of Florida, has named CHARLES T. WEISS, whose address is 712 U.S. Highway One, Suite 301-2, North Palm Beach, Florida, 33408, as its initial registered agent to accept service of process within this State.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above stated Limited Partnership, at the initial registered office of the Limited Partnership in this State, I hereby accept to act in this capacity and agree to comply with the provisions of any applicable statute related thereto.

Dated this 4th day of April, 2017.

2011 MAY -2 PH 12: 25