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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

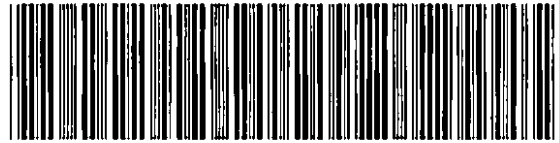
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 SEP 15 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jeffrey A. Lamm, Manager
STAAR Management, LLC
17290 St. James Court
Boca Raton, Florida 33496

9/8, 2020

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

Re: STAAR Management, LLLP

Dear Sir or Madam:

As the principals of STAAR Management, LLLP (the "LLL") are the same principals as STAAR Management, LLC (the "LLC"), I authorize the LLLP to carry the same name as the LLC.

Please proceed with the formation of the LLLP. Thank you in advance for your assistance.

STAAR Management, LLC

By: Jeffrey A. Lamm
Jeffrey A. Lamm, Manager

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAAR Management, LLLP

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Jennifer E. Zakin, Esq.

Contact Person

Redgrave & Rosenthal LLP

Firm/Company

Mizner Park Office Tower, 225 N.E. Mizner Boulevard, Suite 440

Address

Boca Raton, Florida 33432

City, State and Zip Code

jzakin@redgraveandrosenthal.com

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

For further information concerning this matter, please call:

Jennifer E. Zakin, Esq.

at (561) 347-1700

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
☐ \$1,008.75 Filing Fees and Certificate of Status
☐ \$1,052.50 Filing Fees and Certified Copy
☐ \$1,061.25 Filing Fees, 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

CR2E030 (6/17)

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

1. STAAR Management, LLLP

(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. 17290 St. James Court

(Street address of initial designated office)

Boca Raton, Florida 33496

3. Jennifer E. Zakin, Esq.

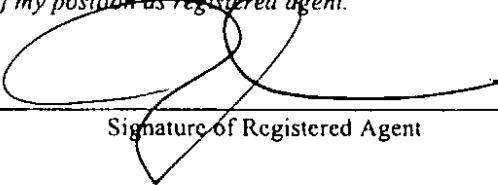
(Name of Registered Agent for Service of Process)

4. Mizner Park Office Tower, 225 N.E. Mizner Boulevard, Suite 440

(Florida street address for Registered Agent)

Boca Raton, Florida 33432

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. 17290 St. James Court

(Mailing address of initial designated office)

Boca Raton, Florida 33496

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

STAAR Management, LLC

17290 St. James Court

Boca Raton, Florida 33496

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 8th day of september, 2020

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.

X jeffrey lamm Manager of General Partner

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75