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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

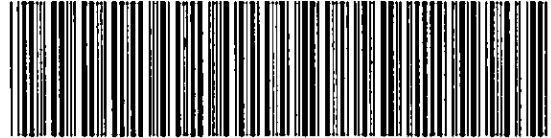
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

YS
10/26/20

Marc B. Gelber, Manager
Perioman Investments, LLC
3700 S. Ocean Boulevard, Apt. 604
Highland Beach, Florida 33487

Randy S. Gelber, Manager
Perioman Investments, LLC
3322 Devon Road
Durham, North Carolina 27707

October 14, 2020

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

Re Perioman Investments, L.L.P.

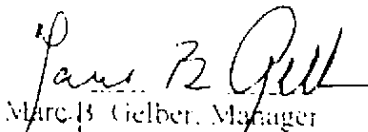
Dear Sir or Madam:

As the principals of Perioman Investments, L.L.P. (the "L.L.P.") are the same principals as Perioman Investments, LLC (the "LLC"), we authorize the L.L.P. to carry the same name as the LLC.


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

Perioman Investments, LLC

By:


Marc B. Gelber, Manager

By:


Randy S. Gelber, Manager

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Perioman Investments, 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

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 (S965 Filing Fee and S35 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)

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TALLAHASSEE, FLORIDA

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

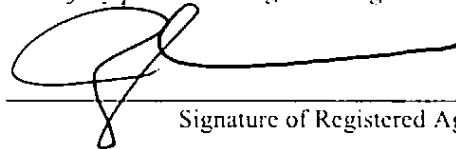
1. Perioman Investments, LLLP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited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

2. 3700 S. Ocean Boulevard, Apt. 604
(Street address of initial designated office)
Highland Beach, Florida 33487

3. Jennifer E. Zakin, Esq.
(Name of Registered Agent for Service of Process)

4. 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. 3700 S. Ocean Boulevard, Apt. 604
(Mailing address of initial designated office)
Highland Beach, Florida 33487

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

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8. Name and business address of each general partner:

Name:

Business Address:

Perioman Investments, LLC

3700 S. Ocean Boulevard, Apt. 604

Highland Beach, Florida 33487

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TALLAHASSEE, FLORIDA

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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 14th day of October, 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 Paul B. Gill, 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