

A22000000226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

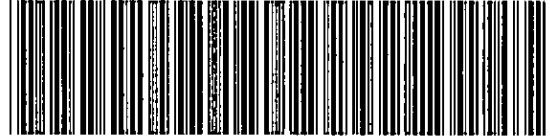
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/17/22--01025--013 **1000.00

APPROVED
AND
FILED
2022 MAR 17 PM 1:15
CLERK OF COURT
JULIA M. STONE, CLERK

APR 12 2022
K. Brumley

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

March 16, 2022

VIA FEDEX (850-245-6051)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: **Filing of Certificate of Limited Partnership: SCIP Family LP**

Dear Sir or Madam:

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

1. Certificate of Limited Partnership of SCIP Family LP, a Florida Limited Partnership; and
2. Certificate Designating Registered Agent and Office.

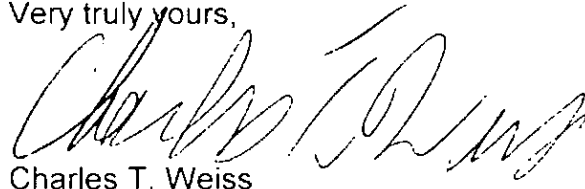
Also enclosed is my Firm's check payable to the Florida Department of State totaling \$1,000 for the following fees:

- Florida Limited Partnership Filing Fee of \$965; and
- Designation of Registered Agent Fee 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,



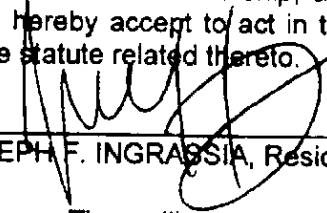
Charles T. Weiss

CTW:sc
Enclosures

Copy to: Mr. Joseph F. Ingrassia

**CERTIFICATE OF LIMITED PARTNERSHIP OF
SCIP FAMILY LP,
A FLORIDA LIMITED PARTNERSHIP**

1. Name. The name of the Partnership is the SCIP FAMILY LP.
2. Business Address. The principal place of business is 14511 Legends Blvd. North, Apt. 401, Ft Myers, FL 33912.
3. Registered Agent. The Partnership has designated JOSEPH F. INGRASSIA as its Registered Agent.
4. Street Address of Registered Agent. The street address of the Registered Agent is 14511 Legends Blvd. North, Apt. 401, Ft Myers, FL 33912.
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: 
JOSEPH F. INGRASSIA, Resident Agent
6. Mailing Address. The mailing address of the Partnership is 14511 Legends Blvd. North, Apt. 401, Ft Myers, FL 33912.
7. Termination. The Partnership shall begin on date of filing of this Certificate with the Department of State and shall continue until December 31, 2070 unless sooner dissolved by law or by agreement of the parties hereto or unless extended by a majority agreement of the Partners.
8. The General Partners. The name and address of the General Partner is:

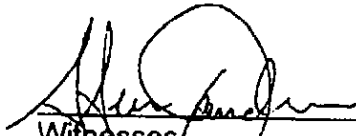
General Partner	Address
IFLP MANAGEMENT, LLC	14511 Legends Blvd. North, Apt. 401 Ft Myers, FL 33912


IN WITNESS WHEREOF, the undersigned, as General Partners, have hereunto set their hands and seals as of this 30th day of January 30, 2022.

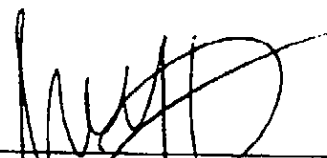
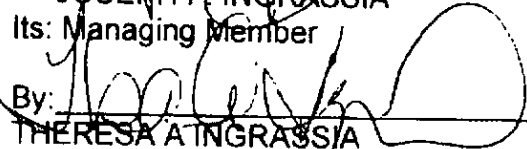
Signed, Sealed and Delivered
In the presence of:

IFLP MANAGEMENT, LLC, a
Florida Limited Liability Company

APPROVED
AND
FILED
2022 MAR 17 PM 1:15
CLERK OF THE COURT
STATE OF FLORIDA


Witnesses
Steven J. Andreau 1/30/2022


Witnesses
Paula Andreau

By: 
JOSEPH F. INGRASSIA
Its: Managing Member
By: 
THERESA A. INGRASSIA
Its: 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:

SCIP FAMILY LP, desiring to organize under the laws of the State of Florida, has named JOSEPH F. INGRASSIA, whose address is 14511 Legends Blvd. North, Apt. 401, Ft Myers, FL 33912., 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 as of this 30th day of January 2022.

By: 

JOSEPH F. INGRASSIA, Resident Agent