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(((H240000407993)))



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From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

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Email Address: Nora. Miller@gray-robinson.com

# FLORIDA/FOREIGN LP/LLLP Edwidge Realty Limited Partnership

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Page Count	02
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Help

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### Saly, Karen

From: Nora H. Miller <Nora.Miller@gray-robinson.com>

Sent: Wednesday, January 31, 2024 4:31 PM

To: Saly, Karen
Cc: Peter R. Law, FRP

**Subject:** Consent to use of Name - Ref W24000016413 and W24000016419

#### EMAIL RECEIVED FROM EXTERNAL SOURCE

We represent the owners of Edwidge Realty Limited Partnership, a Massachusetts limited partnership with Florida document number B19000000077 and Marina & Briana Limited Partnership with Florida document number B1900000078.

The owners have granted consent to use the same names as exist for the Massachusetts limited partnerships for the new Florida limited partnerships.

The owners have asked us to merge the Massachusetts entities into the newly formed Florida entities, with the Florida limited partnerships surviving the merger and they want to use the same names as they currently use. Articles of Merger were filed today by fax under the following audit numbers H24000042760 3 and H24000042738 3.

Thank you for your assistance.

Nora Miller 407-843-8880 407-244-5651 (direct)

Nora H. Miller Of Counsel



GrayRobinson, P.A. · 301 East Pine Street, Suite 1400, Orlando, Florida 32801

GRAYROBINSON

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Please be advised that this law firm may be acting as a debt collector and is attempting to collect a debt and any information provided will be used for that purpose.

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

# **EDWIDGE REALTY LIMITED PARTNERSHIP** (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 suffices: Limited Liability Limited Partnership, L.L.L.P. or LLLP. 2. 300 NORTH COUNTRY CLUB BLVD. (Street address of initial designated office) BOCA RATON, FL 33487 GRAYROBINSON, P.A. (Name of Registered Agent for Service of Process) 4. 225 NE MIZNER BLVD., SUITE 500 (Florida street address for Registered Agent) BOCA RATON, FL 33432 5. Thereby 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. 6. 300 NORTH COUNTRY CLUB BLVD. (Mailing address of initial designated office) BOCA RATON, FL 33487 7. If limited partnership elects to be a limited liability limited partnership, check box $\square$ .

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To:

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8. Name and business address of ea Name:		l partner: Business Address:		
MELE MANAGEMENT COMPANY, IN	C	300 NORTH COENTRY	CLUB BLVD.	
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9. Effective date, if other than the describe date cannot be prior to not the Florida Department of State.)  Note: If the date inserted in this blothis date will not be listed as the doc	ek does no	or meet the applicable	statutory filing requiremen	its
Signed this	_ day of_	January	, <del>2</del> 524	
Signature of each general partner: I/ herein are true. I/We am/are aware t Department of State constitutes a th	hat any fa	lse information subm	itted in godocument to the	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	0 (\$965 Filing Fee and \$	35 Registered Agent Fee)	