

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Sanjiv B. Kortan
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC -3 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A95000000877

1. Name of Limited Partnership

The Muller Family Partnership, Ltd.

DO NOT WRITE IN THIS SPACE.

2. Mailing Address 64 S.E. 5th Avenue Suite, Apt #, etc.		3. Principal Office Address 64 S.E. 5th Avenue Suite, Apt #, etc.		4. Date Formed or Registered To Do Business in Florida June 12, 1995	
City & State Delray Beach, FL		City & State Delray Beach, FL		5. FEI Number 65-0591108	
Zip 33483		Country USA		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐		\$8.75 Additional Fee required for a Certificate of Status			
7. State or Country of Formation Florida					

8a. Capital Contributions as Shown on Record. \$22,000	FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
8b. Amount of Capital Contributions in FLORIDA to date.	

9. Name and Address of Current Registered Agent Nicholas J. DeNovio c/o Baker & McKenzie 701 Brickell Avenue, Ste 1600 Miami, Florida 33131		10. If changed, new registered agent/office Name William C. Schmidt Street Address (P.O. Box Number Is Not Acceptable) 64 S.E. 5th Avenue Suite, Apt. #, etc. City Delray Beach FL Zip Code 33483	
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) [Signature] DATE 11/20/98

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Names of General Partner(s) R.P. Muller, Inc.	Address of Each General Partner (Do NOT Use Post Office Box Numbers) c/o William C. Schmidt 64 S.E. 5th Avenue	City, State and Zip Code Delray Beach, FL 33483	11a. Registration Document Number FES-2832 59719
300002709803--4 -12/11/88-01030-001 ***985.50 ***985.50			
REINSTATEMENT			
CR 12-9			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

11/20/98

Typed or Printed Name of General Partner Signing Form

Ralph P. Muller

Telephone Number

CR2E039 (1/97)