

A 96000000 1998

FILINGS, INC. TESSA ROMAN
 (Requestor's Name)
 2805 LITTLE DEAL ROAD
 (Address)
 TALLAHASSEE, FLORIDA 32308 (904) 385-6735
 (City, State, Zip) (Phone #)

OFFICE USE ONLY

FILED
 SECRETARY OF STATE
 96 OCT 28 PM 1:18
 DIVISION OF CORPORATIONS

896AV00 49616

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MATS ASSOCIATES, LTD (Corporation Name) (Document #) _____
2. _____ (Corporation Name) (Document #) 200001992822--3
3. _____ (Corporation Name) (Document #) -10/31/96--01087--024
****119.00 ****119.00
4. _____ (Corporation Name) (Document #) _____

☒ Walk in ☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation


REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

C. TAX FILING 84
 R. AGENT FEE 35
 C. COPY 119
 TOTAL 119
 N. BANK 10/24/96
 BALANCE DUE 10/24/96
 FILING

Examiner's Initials BK

CERTIFICATE OF LIMITED PARTNERSHIP
OF
MATS ASSOCIATES, LTD.

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1. Name of Limited Partnership: **MATS ASSOCIATES, LTD.**
2. Business Address: **2812 NW 35th St., Miami, Fla. 33142**
3. Name of Registered Agent For Service of Process: **Jacob Fishman**
4. Address of Registered Agent: **1385 NW 15 St., Miami, Fla. 33125**
5. Acceptance of Registered Agent: 
6. Mailing Address of Limited Partnership: **2812 NW 35th St., Miami, Fla. 33142**
7. The latest date upon which the Limited Partnership is to be dissolved: **December 31, 2020** *P96000052852*
8. Name/Address of General Partner: **MATS Management, Inc. 2812 NW 35th St., Miami, Fla. 33142**

Executed this 24 day of October, 1996.

MATS MANAGEMENT, INC.,
General Partner

by: 
President

LP01

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

TO

MATS ASSOCIATES, LTD.

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The undersigned, constituting all of the general partners of MATS ASSOCIATES, LTD., a Florida Limited Partnership, certifies:

1. The amount of capital contributions to date of the limited partners is \$-0-.

2. The amount contributed and anticipated to be contributed by the limited partners at this time totals \$12,000.00.

FURTHER AFFIANT SAYETH NOT

Under Penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

MATS MANAGEMENT, INC.,
General Partner

by: *[Signature]*
Liya Palinsky, President

SWORN TO AND SUBSCRIBED before me this 24 day of
October, 1996.

[Signature]
Notary Public
State of Florida
Printed Name: _____
Comm. No.: _____



JACOB FISHMAN
MY COMMISSION # CC373080 EXPIRES
June 2, 1998
BONDED THRU TROY FARM INSURANCE, INC.

LP02