

**Florida Department of State**  
**Division of Corporations**  
**Public Access System**

**Electronic Filing Cover Sheet**

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 SECRETARY OF STATE  
 DIVISION OF CORPORATION  
 08 APR 28 AM 10:44

To:

Division of Corporations  
 Fax Number : (850) 617-6383

Attn:  
 Gina

From:

Account Name : KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A.  
 Account Number : 073707002173  
 Phone : (954) 966-2112  
 Fax Number : (954) 981-1605

File 2nd

**LP/LP AMENDMENT/RESTATEMENT/CORRECTION**

**MARLE ENTERPRISES OF NORTH CAROLINA LIMITED PARTNERS**

Certificate of Status	0
Certified Copy	1
Page Count	06 7
Estimated Charge	\$105.00

Electronic Filing Menu

Corporate Filing Menu

Help

**G. MCLEOD**

APR 29 2008

**EXAMINER**

RECEIVED  
 08 APR 25 PM 2:03  
 SECRETARY OF STATE  
 TALLAHASSEE, FL



April 23, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MAREL ENTERPRISES OF NORTH CAROLINA LIMITED PARTNERSHIP  
C/O KRAMER GREEN ET AL  
4000 HOLLYWOOD BOULEVARD SUITE 485 S  
HOLLYWOOD, FL 33021

SUBJECT: MAREL ENTERPRISES OF NORTH CAROLINA LIMITED PARTNERSHIP  
REF: B00000000310

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please accept our apology for failing to mention this in our previous letter.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod  
Regulatory Specialist II

FAX Aud. #: H08000103706  
Letter Number: 408A00024081

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Marel Enterprises of North Carolina Limited Partnership  
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Robert M. Kramer

(Contact Person)

Kramer Green, et al.

(Firm/Company)

4000 Hollywood Boulevard Suite 485-South

(Address)

Hollywood, FL 33021

(City, State and Zip Code)

For further information concerning this matter, please call:

Robert M. Kramer

(Name of Contact Person)

at ( 954 ) 966-2112

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☒ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
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

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**AMENDMENT TO CERTIFICATE OF AUTHORITY  
FOR  
FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:  
Marel Enterprises of North Carolina Limited Partnership

2. The jurisdiction of its formation is: North Carolina

3. The date the entity was authorized to transact business in Florida is: 10/10/2000

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:  
\_\_\_\_\_

*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.*

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

Sheldon Harnash

11844 NW 69th Place  
Parkland, FL 33076

Remove

Marel General Partner, LLC

c/o Mark Walker, 12685 Hickory Road  
North Miami, FL 33181

Add

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6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

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8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

- ☐ The entity elects to be a limited liability limited partnership.
- ☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

**Mark A. Walker, President, Mare General Partner LLC**

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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# NORTH CAROLINA

## Department of The Secretary of State

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To all whom these presents shall come, Greetings:

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

**AMENDMENT TO CERTIFICATE OF DOMESTIC LIMITED PARTNERSHIP**

**OF**

**MAREL ENTERPRISES LIMITED PARTNERSHIP**

the original of which was filed in this office on the 7th day of March, 2008.



IN WITNESS WHEREOF, I have hereunto  
set my hand and affixed my official seal at the  
City of Raleigh, this 7th day of March, 2008

*Elaine F. Marshall*  
Secretary of State

Document Id: C20080860038

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State of North Carolina  
Department of the Secretary of State

## Amendment to Certificate of Domestic Limited Partnership

((H08000103706 3)))  
 Date Filed: 3/7/2008 11:20:00 AM  
 Elaine F. Marshall  
 North Carolina Secretary of State  
 C200806600387

## A. Return Acknowledgment to:

Name: Robert M. Kramer, Esq.  
 Mailing Address: 4900 Hollywood Blvd, Suite 465-B  
 City/State/Zip: Hollywood, FL 33021

Date: Use Only

Read instructions on reverse before beginning. Attach additional pages as needed.

No pages  
attached

B. Name of limited partnership (must contain words "limited partnership"): Marvel Enterprises Limited Partnership

C. Date of original filing with Secretary of State: 08/02/2000

D. File number originally assigned by Secretary of State: 0559270

E. Change or amend as follows (complete in applicable sections)

1. Name of limited partnership changed to:

2. Name of registered agent changed to:

3. Address of registered office changed to:

Street/Number:

City:

NC

Zip:

County:

4. Address of office where records are kept changed to:

Street/Number:

City:

NC

Zip:

County:

5. Address of following general partner(s) changed to:

6. Following general partner(s) added:

Name:

Name:

Marvel General Partner, L.L.C.

Street/Number:

Street/Number:

c/o Mark A. Walker, 3885 Mickey

City/State/Zip:

City/State/Zip:

Miami, FL 33101

County:

County:

Miami-Dade

Change Date:

Add Date:

03/05/2008

7. Following general partner(s) withdrawn:

8. CONTINUATION OF BUSINESS. A person owner of withdrawal, the limited partnership intends to continue business pursuant to N.C. Gen. Stat. §57-501.

Name:

Arthur M. Walker Revocable Trust

Street/Number:

2700 W. Atlantic Blvd. #300

City/State/Zip:

Pompano Beach, FL

County:

Broward

Withdrawal Date:

03/05/2008

9. Distribution date changed to:

10. Other information:

F. The signatures of the following general partner(s) executed and filed under the authority of the Secretary of State:

Type or print the name of EACH general partner who signs this document.

1. If the general partner is an individual, complete this section.

Date

a. Name:

Signature:

b. Name:

Signature:

c. Name:

Signature:

2. If the general partner is a corporation or other entity, complete this section.

Date

a. Name of corporation or other entity: Arthur M. Walker Revocable Trust

Name of officer signing:

Robert M. Kramer

Title of officer signing:

Trustee

Signature:

Mark A. Walker

b. Name of corporation or other entity: Marvel General Partnership

Signature:

Mark A. Walker

Title of officer signing:

Manager

Signature:

Mark A. Walker

c. Name of corporation or other entity:

Name of officer signing:

Mark A. Walker

Title of officer signing:

Manager

Signature:

Mark A. Walker

Date of filing:

03/05/2008

Signature:

Mark A. Walker

Date of filing:

03/05/2008

Signature:

Mark A. Walker

NOTES: Filing fee is \$25.00. This document and one more or one hundred copy must be filed with the Secretary of State.

Revised January 2000  
CORPORATIONS DIVISION

P. O. BOX 29922

Form LP-62  
RALEIGH, NC 27626-0422

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