

1365 000 000 116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

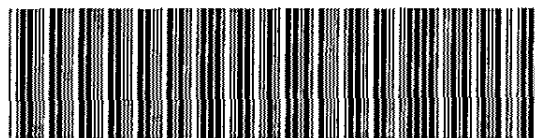
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]

Office Use Only



000047110570

DIVISION OF REGISTRATION

05 MAR -7 AM 10:45

FILED
05 MAR -7 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 240333 6594A
AUTHORIZATION : *Patricia Pizzuti*
COST LIMIT : \$ 507.50

FILED
05 MAR - 7 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 4, 2005

ORDER TIME : 9:36 AM

ORDER NO. : 240333-010

CUSTOMER NO: 6594A

CUSTOMER: Donald J. Kahn, Esq
Green Kahn & Piotrkowski, Pa
317 71st Street

Miami Beach, FL 33141

FOREIGN FILINGS

NAME: PAPIS-MEDOV FAMILY LIMITED
PARTNERSHIP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT#

EXAMINER: _____

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED
05 MAR - 7 PM 1981
TALLAHASSEE
FLORIDA

1. PAPIS-MEDOV FAMILY LIMITED PARTNERSHIP
(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")

3. NEVADA 4. 03.15.2001
(State of Formation) (Date of Formation)

5. DONALD KAHN ESQ
(Name of Registered Agent for Service of Process)

6. 317 71st STREET
(Street Address of Registered Office)

MIAMI BEACH Florida 33141
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

By: D. Kahn
(Agent must sign on this line)

8. 317 71st STREET
MIAMI BEACH FL. 33141
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

ZURAB PAPSON 111-10 77ave. FOREST HILLS
N.Y. 11375

10. 111-10 77ave. FOREST HILLS, N.Y. 11375
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 111-10 77 ave Forest Hills,
New York 11375
(Mailing Address of Limited Partnership)

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

Signed this 04 day of March, 2005
Zurab Papson
General Partner

STATE OF New York

COUNTY OF New York

On this 4 day of March, 2005
ZURAB PAPSON, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Kenneth Rubinstein
(Notary's Signature)

KENNETH RUBINSTEIN
Notary Public, State of New York
No. 31-4952206
Qualified in New York County
Commission Expires February 12, 2009

Kenneth Rubinstein
(Notary's Printed Name)

Seal

My Commission Expires: _____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Zurab Papson
a general partner of PAPIS-MEDOV FAMILY LIMITED PART. a (an)
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 30,000.00 (Thirty thousand)
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 60,000.00

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

Signed this 04 day of March, 2005

Zurab Papson
General Partner

STATE OF New York

COUNTY OF New York

On this 4 day of March, 2005

Zurab Papson, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Kenneth Rubinstein
(Notary Public Signature)

Kenneth Rubinstein
(Notary's Printed Name)

KENNETH RUBINSTEIN
Notary Public, State of New York
No. 31-4962206
Qualified in New York County
Commission Expires February 12, 2006

Seal

My Commission Expires: _____