

BD5 000000217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

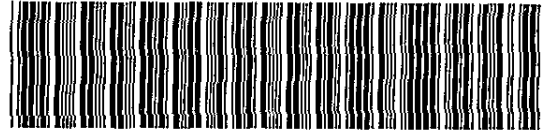
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/16/05--01044--010 **1837.50

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05 MAY 16 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PAUL S. LABINER

5499 N. FEDERAL HIGHWAY • SUITE K • BOCA RATON, FL 33487

ATTORNEY AND COUNSELOR AT LAW
ADMITTED IN NY, NJ AND FLORIDA

TEL: (561) 998-2362
FAX: (561) 998-2358
E-MAIL: fxadv@aol.com

VIA PRIORITY MAIL

May 11, 2005

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: L&J REAL ESTATE INVESTMENTS, L.P. (a Delaware limited partnership)

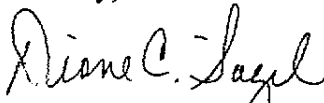
Ladies and Gentlemen:

Pursuant to the above-referenced matter, enclosed, please find the following:

1. (in duplicate) APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA;
 2. Check payable to the "Florida Department of State" in the amount of \$ 1,837.50 for the following:
 - a. \$ 1,750.00 Filing Fees for the Application and Affidavit (based on \$7.00 per \$1,000 of capital contribution of the limited partners, that is allocated for the purpose of transacting business in Florida)
 - b. \$ 35.00 Designation of a Registered Agent
 - c. \$ 52.50 One (1) Certified Copy
- \$ **1,837.50** TOTAL

I have enclosed a self-addressed, stamped envelope for return of a Certified Copy of the Application. Should you have any questions, please feel free to contact my office. Your time and prompt attention to this matter are appreciated.

Sincerely,



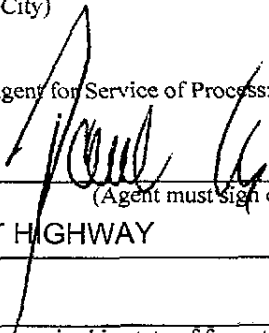
Diane C. Sagil, Paralegal

DCS
Enclosures

Cc: John McCann, Limited Partner
Lisa Galano, Limited Partner

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TALLAHASSEE, FLORIDA

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

1. L&J REAL ESTATE INVESTMENTS, L.P.
(Name of limited partnership as it is in the home state)
2. LJP REAL ESTATE INVESTMENTS, LTD.
(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. DELAWARE 4. APRIL 4, 2005
(State of Formation) (Date of Formation)
5. PAUL S. LABINER
(Name of Registered Agent for Service of Process)
6. 5499 N. FEDERAL HIGHWAY, SUITE #K
(Street Address of Registered Office)
- BOCA RATON, Florida 33487
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:

(Agent must sign on this line)
8. 3500 SOUTH DUPONT HIGHWAY
DOVER, DE 19901
(Address of registered office required in state of formation or, if not required, address of principal office.)
- | 9. NAMES OF GENERAL PARTNERS | STREET ADDRESS |
|------------------------------|--|
| <u>PAUL S. LABINER</u> | <u>5499 N. Federal Highway, #K, Boca Raton, FL 33487</u> |
| | |
| | |
10. 5499 N. FEDERAL HIGHWAY-SUITE #K. BOCA RATON, FLORIDA 33487
(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.

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TALLAHASSEE, FLORIDA

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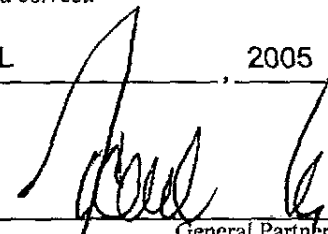
AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared PAUL S. LABINER
a general partner of L&J REAL ESTATE INVESTMENTS, L.F., a (an) DELAWARE
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 4,000,000
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 4,000,000

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 22 day of APRIL, 2005



General Partner

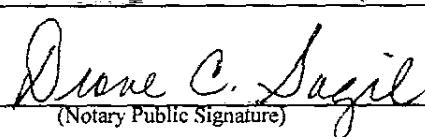
STATE OF FLORIDA
COUNTY OF PALM BEACH

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

On this 22 day of APRIL, 2005


PAUL S. LABINER, personally appeared before me,

- who is personally known to me
 whose identity I proved on the basis of _____



(Notary Public Signature)

DIANE C. SAGIL
(Notary's Printed Name)

 Diane C Sagil
My Commission DD165887
Expires December 08, 2008

Seal My Commission Expires: 12/06/06

12. 5499 N. FEDERAL HIGHWAY, SUITE #K

BOCA RATON, FL 33487

(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 22 day of APRIL, 2005

[Handwritten Signature]

General Partner

STATE OF FLORIDA

COUNTY OF PALM BEACH

On this 22 day of APRIL, 2005

PAUL S. LABINER, personally appeared before me,

who is personally known to me

whose identity I proved on the basis of _____

[Handwritten Signature: Diane C. Sagil]

(Notary Public Signature)

DIANE C. SAGIL
(Notary's Printed Name)



Diane C Sagil
My Commission DD165887
Expires December 06, 2006

Seal

My Commission Expires: 12/06/06

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA