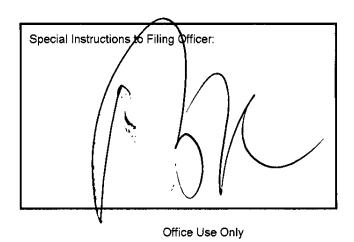
1307000000127

			
(Requestor's Name)			
(Ac	ldress)	, , , , , , , , , , , , , , , , , , , 	
(Address)			
(Ci	ty/State/Zip/Phon	e #)	
(0.	.,,	- ·· ,	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	





800092287948

03/20/07--01046--016 **1000.00



07 APR 11 PM 5: 00 SECRETARY OF STATI



1203 Governors Square Blvd. Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

March 20, 2007

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 6869061 SO

Customer Reference 1: None Given

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Trade Facility Services, LP (PA) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com



RECEIVED

OT APR II PII A

Division of Corporations TALL HELDER OF STATE

March 20, 2007

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: TRADE FACILITY SERVICES, LP

Ref. Number: W07000013726

We have received your document for TRADE FACILITY SERVICES, LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$1,000.00 payment.

While in the process of checking the Pennsylvania Department of State website to determine whether the name actually contained a comma or not, we noticed that Pennsylvania lists a corporation -- TRADE FACILITY SERVICES, INC. -- as the general partner.

Your application lists 4 individuals as general partners. Are the four individuals actually the general partners?

If the corporation is the general partner, it would, of course have to be registered in Florida before the LP could qualify here.

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) 245-6914.

File

Buck Kohr Document Specialist

Letter Number: 507A00019321

wew gpm

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

Acceptable Limited Partnership suffixes: Lin Acceptable Limited Liability Limited Partner.	d Liability Limited Partnership, which must include suffix) nited Partnership, Limited, L.P., LP, or Ltd. ship suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.	
(If name unavailable, name under which to proposes to register to transact be	he limited partnership or limited liability limited partnership usiness in Florida; must contain acceptable suffix.)
2. Pennsylvania	3, 9/5/06
(State or Country of Formation)	(Date of Formation)
4 C	T Corporation System
(Name of Regist	tered Agent for Service of Process)
5 1200 South Pine I	Island Road, Plantation, Florida 33324
J	et address for Registered Agent)
comply with the provisions of all statutes releand I am familiar with an accept the obligation of By: Signal 209 Signal Drive. Pitt	T Corporation System JAMES M. NEWSOME ture of Registered Agent Special Assistant Secretar
/·	incipal office address)
8. If limited partnership is a limited l	liability limited partnership, check box

Page 1 of 3

209 Sigma Drive (Mailing address)			
ittsburgh, PA 15238_			
0. Name, principal office address, and mailing address of each general partner:			
TRADE FACILITY SERVICES, INC.	209 Signe arive		
TRACE FACILITY SERVICES, INC. (Name) FOTUU WYYY	209 Signa Orive (Street Address) Pitshingh, PA 15238		
F0700001948	209 Sigma Drive		
•	(Mailing Address) Pittsburgh, PA 15238		
(Name)	(Street Address)		
	(Mailing Address)		
(Name)	(Street Address)		
	(Mailing Address)		
(Name)	(Street Address)		
	(Mailing Address)		

Page 2 of 3

(Namo)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
,	
11. Effective date, if other than the date of	filing:
(Essective date cannot be prior to n filed by the Florida Department of	or more than 90 days after the date this document is State.)
to the delivery of this application to	tence duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of dy of the entity's records in the jurisdiction under the
Signed this 14th day	of March ,20 06 .
Signature of a reflect partner:	<u> </u>
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 3 of 3

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

FEBRUARY 7, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

TRADE FACILITY SERVICES LP

is duly registered as a Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth