

BO8000000083

(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:

**A. LUNT**

APR 11 2008

**EXAMINER**

Office Use Only



900122701219

04/10/08--01020--015 \*\*1207.50

SECRETARY SEE STAFF  
TALLAHASSEE, FLORIDA

2008 APR 10 AM 10:28

FILED

*LAW OFFICES*  
**Reichstein and Lapat**  
an association of individual attorneys

3300 University Drive  
Suite 311  
Coral Springs, Florida 33065  
(954) 345-6442  
(954) 344-0288 (Fax)

221 North La Salle Street  
Suite 1137  
Chicago, Illinois 60601  
(312) 425-2900  
(312) 425-2901 (Fax)

*Please Reply to Florida Office*

Michael Lapat  
admitted to Practice in:  
Florida, Illinois & New York  
[mlapat@nysbar.com](mailto:mlapat@nysbar.com)

April 4, 2008

Florida Secretary of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
2008 APR 10 A 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>RE: BROTMAN CAPITAL PARTNERS LP</b>	
<b>Foreign Application to Transact Business in Florida</b>	
<b>Including Certified Copy of L.P.</b>	<b>\$1,052.50</b>
<b>BROTMAN CAPITAL ADVISORS, LLC</b>	
<b><u>Including Certified Copy of LLC</u></b>	<b><u>\$ 155.00</u></b>
	<b>\$1,207.50</b>

Dear Sir or Madam,

Please find enclosed herewith entity formation documents for the above-referenced entities. Accompanying these submissions is a **check in the sum of \$1,207.50** representing the filing fees for these formations.

Please file the foregoing as appropriate and return to this office file-stamped/certified copies of same as receipt thereof.

Regards,

  
Julie Hancock

jh  
enclosure

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BROTMAN CAPITAL PARTNERS LP

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

JULIE HANCOCK

(Contact Person)

LAW OFFICES OF MICHAEL LAPAT

(Firm/Company)

3300 UNIVERSITY DRIVE, SUITE 311

(Address)

CORAL SPRINGS FL 33065

(City, State and Zip Code)

2008 APR 10 A 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

JULIE HANCOCK

(Name of Contact Person)

at ( 954 )

345-6442

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees  
(\$965 Filing Fee and  
\$35 Registered Agent  
Fee)

☐ \$1,008.75 Filing Fees  
and Certificate of  
Status

☒ \$1,052.50 Filing Fees  
and Certified Copy

☐ \$1,061.25 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

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA**

1. BROTMAN CAPITAL PARTNERS LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
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 L.L.P.

(If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. DELAWARE 3. 01-18-2008

(State or Country of Formation)

(Date of Formation)

4. RANDY BROTMAN

(Name of Registered Agent for Service of Process)

5. 19210 NORTH CREEKSHORE COURT

(Florida street address for Registered Agent)

BOCA RATON FL 33498

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to  
comply with the provisions of all statutes relative to the proper and complete performance of my duties,  
and I am familiar with and accept the obligations of my position as registered agent.

  
Signature of Registered Agent

7. 19210 NORTH CREEKSHORE COURT

(Principal office address)

BOCA RATON FL 33498

8. If limited partnership is a limited liability limited partnership, check box ☐

FILED  
2008 APR 18 A 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9. 19210 NORTH CREEKSHORE COURT

(Mailing address)

BOCA RATON FL 33498

10. Name, principal office address, and mailing address of each general partner:

BROTMAN CAPITAL MANAGEMENT, LLC

(Name)

19210 NORTH CREEKSHORE COURT

(Street Address)

BOCA RATON FL 33498

LO8-3356

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

2008 APR 10 A 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

_____	_____
(Name)	(Street Address)
	_____
	_____
	(Mailing Address)
	_____
_____	_____
(Name)	(Street Address)
	_____
	_____
	(Mailing Address)
	_____

**FILED**  
 2008 APR 10 A 10:28  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

11. 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.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 08.

Signature of a general partner:  
  
 RANDY BROTMAN, MGR, BROTMAN CAPITAL MANAGEMENT, LLC (GP)

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BROTMAN CAPITAL PARTNERS LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF APRIL, A.D. 2008.

**FILED**  
2008 APR 10 A 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



4494097 8300

080395050

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6501163

DATE: 04-04-08