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SECRETARY OF STATE DIVISION OF CORPORATIONS

B. KOHR
DEC 1 4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lorente Florida Real E Name of Foreign Limited Partner	state I Family Limited Partnership
The enclosed application, certificate of statu- limited partnership or limited liability limited Please return all correspondence concerning	is and fees are submitted to register a foreign of partnership to transact business in Florida, this matter to:
Miguel L. Lorente Contact Person	
Lorente Florida Real Estate I Family Lin Firm/Company	nted Partnerspip
2627 Vining Street Address	
Melbourne, FL 32904 City, State and Zip Code	
VhareI Substitution Yahro . Co	port notification)
For further information concerning this mat	ter, please call:
Valerie Harel Name of Contact Person	at (321) 726-6539 Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$\[\]\\$1,000.00 Filing Fees \\$1,008.75 Filing Fees \\$1,008.75 Filing Fees \\$1,008.75 Filing Fees \\$25 Registered Agent \\$25 Status	▼\$1,052.50 Filing Fees and Certified Copy 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 BUSINES IN FLORIDA

Lorente Florida Real Estate I Family Limited Partnership (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.P. or LLLP. 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. Indiana March 29, 2004 State or Country of Formation Date of Formation Elaine B. Dinho CPA Name of Registered Agent for Service of Process 2717 N. Wickham Road Florida street address for Registered Agent Melbourne, FL 32935 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 an accept the obligations of my position as registered agent. 2717 N. Wickham Road, Suite 3, Melbourne, FL 32935 Principal office address

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

9. <u> </u>	NING STREET	
(Mailing address)		
MELBOUR	NE FL 32904	
10. Name, principal office address, and mailing address of each general partner:		
Miguel L. Lorente Name	2627 Vining Street Street Address Melbourne, FL 32904	
	2627 Vining Street Mailing Address Melbourne, FL 32904	
Lorente Management Corporation Name Pu90000 (14746	2627 Vining Street Street Address Melbourne, FL 32904 2627 Vining Street Mailing Address Melbourne, FL 32904	
Name	Street Address	
	Mailing Address	
Name	Street Address	
	Mailing Address	

₹,

Name	Street Address
	Mailing Address
Name	Street Address
Name	Street Address
	Mailing Address
11. Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more filed by the Florida Department of State.)	than 90 days after the date this document is
to the delivery of this application to the Flo	ally authenticated, not more than 90 days prior orida Department of State, by the Secretary of e entity's records in the jurisdiction under the
Signed this day of	ocember ,20 09.
Signature of a general partner:	
111	
	
~	0.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$ 52.5 Certificate of Status (optional): \$ 8.75	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

LORENTE FLORIDA REAL ESTATE I FAMILY LIMITED PARTNERSHIP

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 29, 2004, and was in existence or authorized to transact business in the State of Indiana on December 02, 2009.

I further certify this Domestic Limited Partnership (LP) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Second Day of December, 2009.

TODD ROKITA, Secretary of State

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