

REC'D
SECRETARY OF STATE
DIVISION OF COMMERCE
10 MAY -6 PM 1:14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELIZABETH/MORRIS AVENUE CENTER ASSOCIATES, L.P.
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:

Louis D. Zaretsky

Contact Person

Ritter Zaretsky & Lieber, LLP

Firm/Company

2915 Biscayne Blvd., Suite 300

Address

Miami, FL 33137

City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louis D. Zaretsky

Name of Contact Person

at (305)

372-0933

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. ELIZABETH/MORRIS AVENUE CENTER ASSOCIATES, L.P.

(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 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.

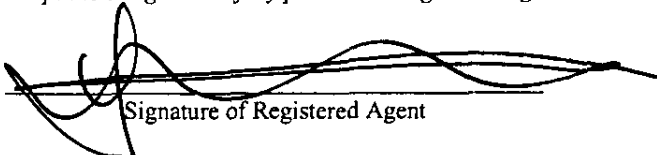
2. New Jersey 3. 8/5/1997
State or Country of Formation Date of Formation

4. Louis D. Zaretsky
Name of Registered Agent for Service of Process

5. 2915 Biscayne Blvd., Suite 300
Florida street address for Registered Agent

Miami, FL 33137

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. 2915 Biscayne Blvd., Suite 300
Principal office address

Miami, FL 33137

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

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9. One Stevens Road #1, Wallington, New Jersey 07057
(Mailing address)

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

JN Morris, Inc.

Name

One Stevens Road # 1

Street Address

Wallington, New Jersey 07057

Mailing Address

Name _____

Street Address

Mailing Address

Name

Street Address

Mailing Address

Name

Street Address

Mailing Address

_____	_____
Name	Street Address
_____	_____
_____	_____
_____	Mailing Address
_____	_____
_____	_____
Name	Street Address
_____	_____
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_____	Mailing Address
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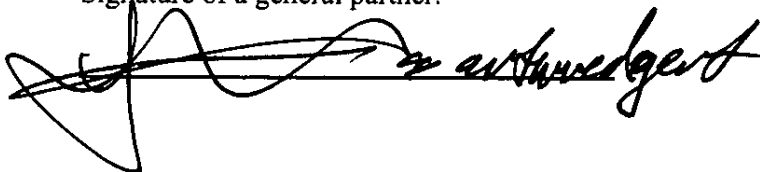
11. Effective date, if other than the date of filing: _____.

(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 5th day of MAY, 20 10.

Signature of a general partner:



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

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
SHORT FORM STANDING**

ELIZABETH/MORRIS AVENUE CENTER ASSOCIATES, L.P.

0600041301

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Limited Partnership was registered by this office on August 5, 1997.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*James C Nuckel
One Stevens Rd. #1
Wallington, NJ 07057 0000*



Certification# 116985635

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
28th day of April, 2010*

A handwritten signature in black ink, appearing to be "A. J. ...", written over a horizontal line.

State Treasurer

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp