# B10000000136

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Griffoldio) Zipii Tione ii j
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800181699068

07/14/10--01002--001 \*\*925.00

800181699068 06/28/10--01034--020 \*\*25.00

**800181699068** 06/28/10--01034--019 \*\*50.00

T. HAMPTON

AUG 1 i 2010

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations									
SUBJECT: Margui Family Partners, Ltd.									
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:									
Paolo Amore									
Contact Person									
Margui Family Partners, Lt	<u>d.</u>								
Firm/Company									
8404 N.W. 64th St.									
Address									
Miami, FL 33166									
City, State and Zip Code									
paolo@idico.com									
E-mail address: (to be used for future annual report notification)									
For further information concerning this mat	ter, please call:								
Paolo Amore	at ( 305 ) 913-5440								
Name of Contact Person	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 Certified Copy, and Certificate of Status								
STREET ADDRESS:	MAILING ADDRESS:								
Registration Section	Registration Section								
Division of Corporations	Division of Corporations								
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314								
Tallahassee, FL 32301	· minimutes, · is sau i								



RECEIVED

09 JUL 13 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 29, 2010

PAOLO AMORE 8404 NW 64 ST MIAMI, FL 33166

SUBJECT: MARGUI FAMILY PARTNERS, LTD.

Ref. Number: W10000031041

We have received your document for MARGUI FAMILY PARTNERS, LTD. and check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$925.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a General Partnership & LLP qualification, but your entity is a Foreign Limited Partnership (LTD). Please complete and return the enclosed blank form(s).

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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 110A00015956



RECEIVED

10 AUG 10 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 14, 2010

PAOLO AMORE 8404 NW 64 ST MIAMI, FL 33166

SUBJECT: MARGUI FAMILY PARTNERS, LTD.

Ref. Number: W10000031041

We have received your document for MARGUI FAMILY PARTNERS, LTD. and your check(s) totaling \$75.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 110A00015956

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

1.	Margui Family Partners, Ltd.				
	(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) ceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. ceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.				
	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	Texas 3. 12/15/1994  State or Country of Formation Date of Formation				
	State or Country of Formation Date of Formation				
4	Paolo Amore				
	Name of Registered Agent for Service of Process				
5	8404 N.W. 64 St.				
	Florida street address for Registered Agent				
	Miami, FL 33166				
con	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, it I am familiar with an accept the obligations of my position as registered agent.  Signature of Registated Agent				
7.	8404 N.W. 64 St.				
	Principal office address				
	Miami, FL 33166				

10 AUG 10 PM 1: 44

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

98404 N.W. 64th St									
(Mailing address)									
Miami, FL 33166									
10. Name, principal office addre	ess, and mailing address of each general partner:								
Paolo Amore	8404 N.W. 64 St.								
Name	Street Address Miami, FL 33166								
	Mailing Address								
Name	Street Address								
	Mailing Address								
Name	Street Address								
	Mailing Address								
Name	Street Address								
	Mailing Address								

10 AUG 10 PM 1: 44

	Name		Street Address			
			Ма	iling Addre	ss	
	Name		Stre	eet Address		
			Ma	iling Addre	ss	·
11. Effective date	, if other than t	ne date of filing:				·•
(Effective date filed by the Flo			than 90 days after i	the date th	nis docur	ment is
to the delivery	of this applic official havin	cation to the Flor g custody of the	y authenticated, no ida Department of entity's records in	State, by 1	the Secre	etary of
Signed this	09	day of	July	,20	10	10 AU

Signature of a general partner:

**\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee) \$ **52.50** 

Filing Fees: Certified Copy (optional): Certificate of Status (optional):

\$ 8.75

 Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



# Office of the Secretary of State

### CERTIFICATE OF FILING OF

#### MARGUI FAMILY PARTNERS, LTD. File Number: 7821110

The undersigned, as Secretary of State of Texas, hereby certifies that the application for reinstatement for the above named entity has been received in this office and has been found to conform to law. It is further certified that the entity has been reinstated to active status on the records of this office.

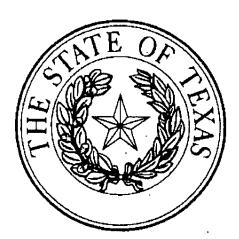
ACCORDINGLY the undersigned, as Secretary of State, and by virtue of the authority vested in the Secretary by law hereby issues this Certificate of Filing.

Dated: 06/29/2010

Phone: (512) 463-5555

Prepared by: Laura Rhinehart

Effective: 06/29/2010



Hope Andrade Secretary of State