

#B10000000204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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EFFECTIVE DATE
01/01/2011

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10 DEC 21 AM 8:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
DEC 21 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Moross Limited Partnership

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:

Ali S. Zaidi

Contact Person

Trowbridge Law Firm, PC

Firm/Company

1380 E Jefferson Avenue

Address

Detroit, MI 48207

City, State and Zip Code

azaidi@trowbridgehouse.com

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

For further information concerning this matter, please call:

Ali S. Zaidi

Name of Contact Person

at (313) 259-6900 x128

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. Moross 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.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. Michigan

State or Country of Formation

3. December 18, 1996

Date of Formation

4. Name of Registered Agent for Service of Process and Florida Street Address:

Rosemary Johnson

217 Sandal Lane

West Palm Beach, FL 33404

EFFECTIVE DATE
01/01/2011

5. 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.

Rosemary Johnson
Signature of Registered Agent

7. Principle Office: (Florida Street Address)

725 Gulf Shore Drive, Unit 203A

Destin, FL 32541-5440

8. Mailing Address:

725 Gulf Shore Drive, Unit 203A

Destin, FL 32541-5440

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

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

Name of General Partner: Pacesetter Management, Inc.

Name of General Partner: _____

Street Address: 725 Gulf Shore Drive, Unit 203A

Street Address: _____

Destin, FL 32541-5440

Mailing Address: 725 Gulf Shore Drive, Unit 203A

Mailing Address: _____

Destin, FL 32541-5440

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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TALLAHASSEE, FLORIDA

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: January 1, 2011

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

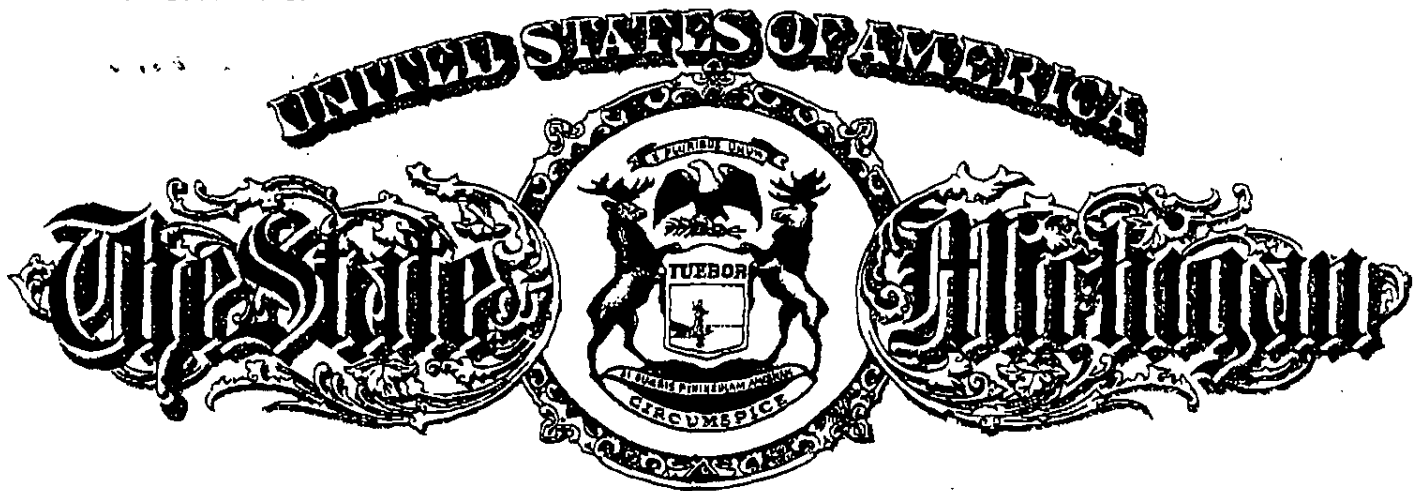
12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 17th day of December, 20 10


Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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



Department of Energy, Labor & Economic Growth

Lansing, Michigan

This is to Certify That

MOROSS LIMITED PARTNERSHIP

a Michigan limited partnership, was formed on December 18, 1996, for a term expiring January 1, 2027.

I FURTHER CERTIFY that as of this date, the Certificate of Registration has not been canceled and is in full force and effect.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 16th day of December, 2010.

A handwritten signature in dark ink, appearing to read "A. J. [unclear]".

, Director
Bureau of Commercial Services

Sent by facsimile transmission