

B12000000102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

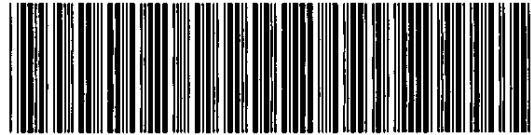
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/10/12--01035--017 **1061.25

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 23 PM 2:42

MAY 24 2012

T. HAMPTON

68592-210

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J+P Associates
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:

Beverly Johnson
Contact Person

J+P Associates
Firm/Company

257 West 97 Street
Address

New York, NY 10025
City, State and Zip Code

Bev205@ADL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beverly Johnson at (212) 864-2433
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input checked="" type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 MAY 23 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 14, 2012

BEVERLY JOHNSON
J & P ASSOCIATES
257 W 97 ST
NEW YORK, NY 10025

SUBJECT: J & P ASSOCIATES, L.P.
Ref. Number: W12000026586

We have received your document for J & P ASSOCIATES, L.P. and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited partnership or limited liability limited partnership is not available. A foreign limited partnership or limited liability limited partnership whose name is not available must adopt an alternate name for use in the state of Florida. Please insert the alternate name in the space provided. Simply adding "of Florida" or "Florida" to the end of an entity name does not constitute a difference.

NOTE: The alternate name must contain an acceptable suffix. Acceptable limited partnership suffixes include: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable limited liability limited partnership suffixes include: Limited Liability Limited Partnership, LLLP, or L.L.L.P.

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 612A00014225

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

1. J+P 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.

J+P Associates Real Estate, 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. New York

State or Country of Formation

3. August 20, 1982

Date of Formation

4. Federal Employer Identification Number: 13-3127413

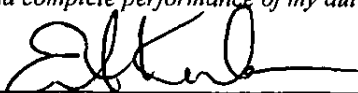
5. Name of Registered Agent for Service of Process and Florida Street Address:

ERIC A Krebs, Esq

801 Jenks Ave (Suite F)

PANAMA CITY, FL 32401

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. Principal Office:

J+P Associates
257 West 97 Street
New York, NY 10025

8. Mailing Address:

J+P Associates
257 West 97 St.
NY NY 10025

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: Beverly Johnson

Name of General Partner: _____

Street Address: 257 West 97 St.

Street Address: _____

NY NY 10025

Mailing Address: Same

Mailing Address: _____

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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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: _____
 (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 4th day of May, 20 12.

Beverly Johnson
 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

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State of New York
Department of State } ss:

I hereby certify, that J & P ASSOCIATES a NEW YORK Limited Partnership, filed a Certificate of Adoption of the Revised Limited Partnership Act, pursuant to the Partnership Law, on 05/26/1992, and that the Limited Partnership is existing so far as shown by the records of the Department.

I further certify, that no other documents have been filed by such Limited Partnership.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 04th day of May
two thousand and twelve.*

Daniel Shapiro
First Deputy Secretary of State