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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

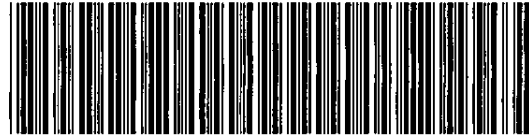
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE  
JUN 28 2012  
EXAMINER

**YUDELL and LONOFF, LLC**

**CARL R. YUDELL**

*Attorney at Law*

400 Central Ave., Suite 110

Northfield, IL 60093

(847) 441-9500

Fax (847) 441-9504

e-mail: [carl@yudell.net](mailto:carl@yudell.net)

June 21, 2012

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32301

**Re: Dudley Family Partnership, L.P.**

Dear Sir or Madam:

Enclosed for the above-referenced Delaware Limited Partnership, please find the following:

- 1) **Application (with Cover Letter)** by Foreign Limited Liability Partnership to Transact Business in Florida (original and one copy);
- 2) **A Certificate of Good Standing** for the Company from the Delaware Secretary of State;
- 3) **Check** number 3137 in the amount of **\$1,000.00** for the filing fee; and
- 4) **A pre-addressed, postage paid envelope** for the file stamped Application.

Should you have any questions regarding the enclosed Application, please call 847-441-9500, extension 228. Thank you for your assistance.

Sincerely,



Diane T. Parker

Encl.

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DUDLEY FAMILY PARTNERSHIP, 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:

Carl R. Yudell

Contact Person

Yudell and Lonoff, LLC

Firm/Company

400 Central Avenue #110

Address

Northfield, IL 60093

City, State and Zip Code

diane@yudell.net

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

For further information concerning this matter, please call:

Carl R. Yudell

at ( 847 ) 441-9500, ext. 225

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
- ☐ \$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

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TALLAHASSEE, FLORIDA

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

1. **DUDLEY FAMILY PARTNERSHIP, 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. **Delaware** 3. **August 16, 2000**  
State or Country of Formation Date of Formation

4. Federal Employer Identification Number: **36-4396409**

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

**Michael Dudley**

**6088 NW 68th Way**

**Parkland, FL 33067**

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:

**2000 S. Ocean Blvd, Unit 3J**

**Boca Raton, FL 33432**

8. Mailing Address:

**Michael Dudley**

**6088 NW 68th Way**

**Parkland, FL 33067**

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: **Kathleen Bradley Trustee**

Street Address: **Kathleen Bradley Trust**  
**4830 Shannamara Drive**

Mailing Address: **Matthews, NC 28105**

Name of General Partner: **Michael Dudley Trustee**

Street Address: **Michael Dudley Trust**  
**6088 NW 68th Way**

Mailing Address: **Parkland, FL 33067**

Name of General Partner: **Anne Ostidick, Trustee**

Street Address: **Anne Ostidick Trust**  
**217 A Street**

Mailing Address: **Genoa, IL 60135**

Name of General Partner:

Street Address:

Mailing Address:

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OF FLORIDA

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

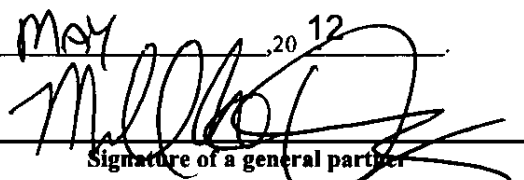
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

11. Effective date, if other than the date of filing: \_\_\_\_\_

(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 29<sup>th</sup> day of May, 2012

  
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.

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

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*The First State*


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DUDLEY FAMILY PARTNERSHIP, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JUNE, A.D. 2012.



3275539 8300

120620367

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 9620945

DATE: 06-05-12