

B13000000086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

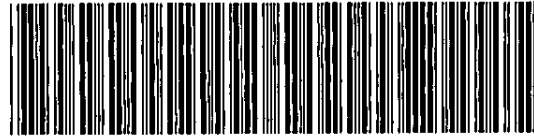
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/22/13--01001--017 **2282.50

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 MAR 21 PM 4:53
TO ADVANCE FILING
SUFFICIENCY OF FILING

FILED
13 MAR 21 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2013

ADVANCED INCORPORATING SERVICE, INC.

TALLAHASSEE, FL 32316

SUBJECT: MADISON PARTNERS, L.P.
Ref. Number: W13000016773

FILED
13 MAR 21 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MADISON PARTNERS, 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 existing entity with a similar name is MADISON PARTNERS, LLC -- Doc. Number L05000065700.,

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) 245-6051.

Buck Kohr
Regulatory Specialist II

Letter Number: 813A00006796

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2224
Email: orders@aisincfl.com
Website: www.aisincfl.com

FILED
13 APR 21 AM 8:30
TALLAHASSEE, FLORIDA

NAME OF ENTITY

Madison Partners, L.P.

FOR OFFICE USE ONLY

PICK ONE:

☒ CERTIFIED COPY ☐ PHOTOCOPY ☒ C.U.S.

FILING:

☐ CORPORATION ☐ LLC ☒ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN
☐ OTHER _____

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY
Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE 3/21/13 TIME 5:00

Notes: _____

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

FILED
13 MAR 21 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Madison Partners, 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.

MADISON PARTNERS OF CALIFORNIA, 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. California

State or Country of Formation

3. February 4, 2004

Date of Formation

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

Stuart Grossman

201 South Biscayne Boulevard, 22nd Floor

Miami, FL 33131

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.

Stuart Grossman
Signature of Registered Agent

7. Principle Office: (Florida Street Address)

95 North County Road

Palm Beach, FL 33480

8. Mailing Address:

95 North County Road

Palm Beach, FL 33480

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: Millennium Holdings, Inc.

Name of General Partner: _____

Street Address: 95 North County Road

Street Address: _____

Palm Beach, FL 33480

Mailing Address: 95 North County Road

Mailing Address: _____

Palm Beach, FL 33480

Name of General Partner: _____

Name of General Partner: _____

Street Address: F08000002467

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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 20th day of March, 2013.



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

**AFFIDAVIT BY GENERAL PARTNER
OF A FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO ADOPT AN ALTERNATE NAME
IN THE STATE OF FLORIDA**

Because the name of the limited partnership or limited liability limited partnership is not available in Florida, Madison Partners, L.P.

(Name of foreign LP or LLLP in home state)

an out-of-state limited partnership or limited liability limited partnership, hereby adopts the following alternate name for the purpose of transacting business in Florida:

Madison Partners of California, L.P.

(Alternate name adopted for use in the state of Florida, including acceptable suffix. *)

Date: 3/22/2013



(Signature of General Partner)

John G. Burgee of Millennium Holdings, Inc.

(Printed Name of General Partner)

** Acceptable Limited Partnership suffixes include: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes include: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

Filing Fee: \$52.50

**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME: MADISON PARTNERS, LP

FILE NUMBER:	200403800005
FORMATION DATE:	02/04/2004
TYPE:	DOMESTIC LIMITED PARTNERSHIP
JURISDICTION:	CALIFORNIA
STATUS:	ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 14, 2013.

Debra Bowen

DEBRA BOWEN
Secretary of State

EMS