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2013 JUL 30 AM 8: 51

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COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

Tod Williams Billie Tsien Architects + Partners, LLP

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:

Dial	hard		berts	an
1710	naiu	1170	ひている	VI I

Contact Person

Tod Williams Billie Tsien Architects + Partners, LLP

Firm/Company

222 Central Park S, ground floor

Address

New York, NY 10019

City, State and Zip Code

rrobertson@twbta.com

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

For further information concerning this matter, please call:

Richard Robertson

... 212

582-2385

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

X\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent

☐ \$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

Fee)

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 113 JUL 30 M 8:51

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

1. Tod Williams Billie Tsien Architects + Partners, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited Liability Limited Partnership, LLLP, or LLP, or LLP,

Acceptable Limited I	Liahility Limited Partnership suffixes: Limi	ited Liahility Limited P	artnership, L.L.L.P. or LLLP.		
If name unavailable	e, name under which the limited partnership business in Florida; m	or limited liability limust contain acceptable		ister to tr	ansact
, New York State		_{3.} 10/24/2002	2		
	ate or Country of Formation	1	Date of Formation		
4. Federal Employe	r Identification Number: 13-2924912	2			
5. Name of Register	ed Agent for Service of Process and Flor	ida Street Address:			
eResident A	gent, Inc.				
236 East 6th	n Ave				
Tallahassee	, FL 32303				
	ne appointment as registered agent and agrative to the proper and complete performantistered agent.				
	Signature of	f Registered Agent	φ - ⁶ 34		1 .
7. Principal Office: Ungerlaw, P		. Mailing Address:	• • • • • • • • • • • • • • • • • • •	30	**************************************
12121 Wilsh	ire Blvd, suite 1201			AH 8:	
Los Angeles	, CA 90025		<u> </u>	:5	
9. If limited partne	rship is a limited liability limited partner	ship, check box .			
10. Name, principa	l office address, and mailing address of e				
Name of General	Partner: Tod Williams	Name of General	Partner: Billie Tsien		
Street Address:	222 Central Park South	Street Address:	222 Central Park S	outh	
	New York, NY 10019		New York, NY 100)19	
Mailing Address	same as above	Mailing Address	same as above		
Name of Genera	Partner: Paul Schulhof	Name of General	Partner:		
Street Address:	75 Henry Street Apt 17H	Street Address:			
	Brooklyn, NY 11201				
Mailing Address	same as above	Mailing Address	·		

Name of General Partner:	1 of 2 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	e this document is filed by the Florida Department of State.)				
12. Attached is a certificate of existence duly authenticated, not more Florida Department of State, by the Secretary of State or other official the law of which it is organized.					
Signed this 22 day of July	.20 13				
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	0.00 (\$965 Filing Fee and \$35 Registered Agent Fee)				

Page 2 of 2

\$52.50 \$8.75

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

2013 JUL 30 AM 8: 51

State of New York Department of State } ss:

I hereby certify, that TOD WILLIAMS BILLIE TSIEN ARCHITECTS LLP a NEW YORK Registered Limited Liability Partnership filed a Notice of Registration pursuant to Partnership Law on 10/24/2002.

An Affidavit of Publication of TOD WILLIAMS BILLIE TSIEN ARCHITECTS LLP was filed on 03/28/2003.

An Affidavit of Publication of TOD WILLIAMS BILLIE TSIEN ARCHITECTS LLP was filed on 03/28/2003.

A Certificate of Amendment TOD WILLIAMS BILLIE TSIEN ARCHITECTS LLP, changing its name to TOD WILLIAMS BILLIE TSLEN ARCHITECTS + PARTNERS, LLP, was filed 01/31/2013.

The Registered Limited Liability Partnership has filed Affidavits of Publication under the Partnership Law W. **.

2013 JUL 30 AM 6: 51

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of July two thousand and thirteen.

Executive Deputy Secretary of State