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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GREENBERG TRAUIG (WEST PALM BEACH)
Account Number : 075201001473
Phone : (561) 955-7600
Fax Number : (561) 395-2807

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: gary@rubinassociatespa.com

**FLORIDA/FOREIGN LP/LLP
Sandler Family Partnership, LLLP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

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Help

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANACT BUSINESS IN FLORIDA**

1. Sandler Family Partnership, LLLP

(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

State or Country of Formation

3. 01/21/2014

Date of Formation

4. Federal Employer Identification Number: 46-4610764

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

Gary Rubin

2080 NW Boca Raton Blvd.

Boca Raton, FL 33431

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:

2080 NW Boca Raton Blvd.

Boca Raton, FL 33431

8. Mailing Address:

2080 NW Boca Raton Blvd.

Boca Raton, FL 33431

9. If limited partnership is a limited liability limited partnership, check box. ☒ XX

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

Name of General Partner: **Sandler Family GP, LLC** Name of General Partner: _____

Street Address: **2080 NW Boca Raton Blvd.** Street Address: _____

Boca Raton, FL 33431

Mailing Address: **014000000463** 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 24 day of January, 202014
Sender Family GP, LLC
By: [Signature]
Signature of a general partner Gary Rubin

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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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SANDLER FAMILY PARTNERSHIP, LLLP" 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 TWENTY-FOURTH DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SANDLER FAMILY PARTNERSHIP, LLLP" WAS FORMED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1081431

DATE: 01-24-14