B15000000058

		·
(Re	equestor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	e #)
_	_	
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
On a sight hardward in a day	F.W O#	
Special Instructions to	Filing Oπicer:	
		ì





200267303562

12/12/14--01024--007 **130.00

01/02/15--01001--001 **878.75

SECRETARY OF STATE
ALLAHASSEE FLORIDA

Joeks-the

** R 1 6 2015

T. HAMPTON

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	SIMON GROUP	LIMITED PARTN	ERSHIP an Ohio Limi	ted Partnership
Nam	e of Foreign Limited Partn	ership or Limited Liabilit	y Limited Partnership	
partnership to transact but Please return all correspon	siness in Florida. ndence concerning this ma	tter to:	er a foreign limited partnership	or limited liability limited
	Charles 51. Contact Person (GROUP LIMITE Firm/Company 55 Corporate Address Jup, ter FL ty, Stale and Zip Code	moN		
	Contact Person	at this		
Simon	GROUP LIMITE	& Partneryly		
	Firm/Company			
51	55 Corporate	Way Suite E		
	Address	. ~		
	Jupiter FL	3345 8		
Ci	ty, State and Zip Code			
Csimo	sed for future annual repor	nents, com		
E-mail address: (to be u	sed for future annual repor	t notification)		
For further information co	oncerning this matter, pleas	e call:		
Charlies Simon o	or Sandy Beel the Person	at (56/)	847-4658	
Name of Contac	t Person	Area Code and Day	time Telephone Number	
Enclosed is a check for th	e 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	878 Balance Due
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle	MAILING ADDRESS Registration Section Division of Corporation P. O. Box 6327 Tallahassee, FL 32314		



December 31, 2014

CHARLES SIMON SIMON GROUP LIMITED PARTNERSHIP LLC 5155 CORPORATE WAY - STE E JUPITER, FL 33458

SUBJECT: SIMON GROUP LIMITED PARTNERSHIP LLC

Ref. Number: W14000075100

We have received your document for SIMON GROUP LIMITED PARTNERSHIP LLC and your check(s) totaling \$1008.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 914A00027550

15 HAR 13 AM IO: 00



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2014

CHARLES SIMON SIMON GROUP LIMITED PARTNERSHIP LLC 5155 CORPORATE WAY - STE E JUPITER, FL 33458

SUBJECT: SIMON GROUP LIMITED PARTNERSHIP LLC

Ref. Number: W14000075100

We have received your document for SIMON GROUP LIMITED PARTNERSHIP LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$878.75. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a FOREIGN LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 314A00026735

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

1. SIMON GROUP LIMITED Par	rthership an Ohio Limited Partnership
1. Simon GROUP Limited Partnership or Limited Liability Lim Acceptable Limited Partnership suffixes: Limited Partnership, Limited Partnership suffixes: Limited	ited, L.P., LP, or Ltd.
SIMON GROUP LIMITED	
If name unavailable, name under which the limited partnership or business in Florida; must o	limited liability limited partnership proposes to register to transact
	3 8-30 - 9 S
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number: 31-1464	149
5. Name of Registered Agent for Service of Process and Florida	
Charles Simon	
5755 Corporate Way Suite E Jup. ter FL 33458	
Jup. ter FL 33458	
6. I hereby accept the appointment as registered agent and agree to of all statutes relative to the proper and complete performance of my position as registered agent.	act in this capacity. I further agree to comply with the provisions fmy duties, and I am familiar with and accept the obligations of
Signature of Re	gistered Agent Charles Simon, Managing Member
7. Principal Office: 8. M	ailing Address:
5155 Corporate Way #E	5155 Corporate Way #E
5155 Corporate Way #E Jup. ter PC 33458	5155 Corporate Way #E Jupiter PL 33458
9. If limited partnership is a limited liability limited partnership	
Name of General Partner: Simco Really 275, a M15-1452 Street Address: 5155 Cornorate Way #E	general partner: n Ohio Limited Liability Company, LLC Name of General Partner:
M15-1452 Street Address: 5155 Corporate Way #E Jup, for FC 33458 Mailing Address: 5155 Corporate Way #E Jup, for FC 33458	Street Address:
Jup, Ar FL 33458	ALCO H
Mailing Address: 5155 Corporate Way #E	Mailing Address:
Jup. ter PC 33458	
Name of General Partner:	Name of General Partner:
Street Address:	The second second
Mailing Address:	Mailing Address:

	Page 1 of 2
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
12. Attached is a certificate of existence duly a Florida Department of State, by the Secretary of	iling: In 90 days after the date this document is filed by the Florida Department of State.) State or other official having custody of the entity's records in the jurisdiction under
the law of which it is organized. Signed this day of	
	Signature of a general partner Charles Simon, Managing Member at the facts stated herein are true and the individual is aware that false information State constitutes a third degree felony as provided for in s.817.155, F.S.

Page 2 of 2

\$52.50 \$8.75

Filing Fees:

Certified Copy (optional): Certificate of Status (optional): \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

TALLAHASSEP FLORIDA

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SIMON GROUP LIMITED PARTNERSHIP, an Ohio Limited Partnership, Registration Number 915972, filed on August 30, 1995, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 24th day of November, A.D. 2014.

Ohio Secretary of State

Validation Number: 201432801829