

B 15000000297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT 28 2015

- Fax Transmission

To: 18502456030@nextivafax.com**From:** Maspons Sellek Jacobs, LLP**Fax:** 18502456030**Date:** 10/27/2015**RE:** Status of proc. of Doing Bus. Applc. for Norris
Group Community Reinvestment, L.P. that filing**Pages:** 13

Comments:

Attention: Karen Saly:

Per our conversation, attached is the paperwork for the application I need a status of processing on, as filing fee check has cleared and been deposited by the state.

Let me know if you need anything else.

Thank you!

Vanessa M. Collazo, FRP
Paralegal to Miguel A. Maspons
[signature block logo 100]
BAC Colonnade Building
2333 Ponce De Leon Blvd., Suite 314
Coral Gables, Florida 33134
Phone: 786.539.1430 | Fax: 305.441.1119
Email: vcollazo@maspons.com<mailto:vcollazo@maspons.com>
www.maspons.com<http://www.maspons.com/>

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15 OCT 27 PM 4:59
SOUTHERN STATE
FEDERAL COURT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Norris Group Community Reinvestment, 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:

Miguel A. Maspons, Esq.

Contact Person

Maspons, Sellek, Jacobs, LLP

Firm/Company

2333 Ponce De Leon Blvd., Suite 314

Address

Coral Gables, Florida 33134

City, State and Zip Code

msj@msjcorpserv.com

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

For further information concerning this matter, please call:

Vanessa M. Collazo

at (

786

)

539-1430

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	<input type="checkbox"/> \$1,008.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$1,052.50 Filing Fees and Certified Copy	<input type="checkbox"/> \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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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

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

Norris Group Community Reinvestment, L.P.

1. _____
(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. California 3. October 6, 2009
State or Country of Formation Date of Formation

4. Federal Employer Identification Number: 27-1065663

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

MSJ Corporate Services, LLC

2333 Ponce De Leon Blvd., Suite 314

Coral Gables, Florida 33134

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:

1845 Chicago Avenue, Unit C

Riverside, CA 92507

8. Mailing Address:

1845 Chicago Avenue, Unit C

Riverside, CA 92507

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: TNG Real Estate Auction, Inc.

Name of General Partner: _____

Street Address: 3001 Aloma Avenue, Suite 129

Street Address: _____

Winter Park, Florida 32792

Mailing Address: 1845 Chicago Avenue, Unit C

Mailing Address: _____

Riverside, CA 92507

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

Page 1 of 2

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: Use filing date.
(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 29th day of September, 2015

[Signature]
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

Page 2 of 2

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2015 OCT 19 PM 5:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/27/2015

13:22

TO: 18502456030 FROM: 3056028891

Page: 6

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: NORRIS GROUP COMMUNITY REINVESTMENT L.P.

FILE NUMBER: 200928000003
FORMATION DATE: 10/06/2009
TYPE: DOMESTIC LIMITED PARTNERSHIP
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 October 14, 2015.

ALEX PADILLA
Secretary of State

CLL