

B170000000013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

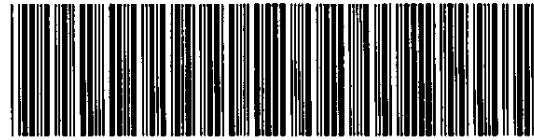
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-74435

Office Use Only



200291543232

10/28/16--01028--002 **1052.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JAN 13 PM 5:01

FILED

K. SALY

JAN 17 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2016

SHERRON PERMASHWAR, CPA
BMP TAX AND ACCOUNTING, INC.
125 SOUTH STATE RD 7, STE. 104-203
WELLINGTON, FL 33414

SUBJECT: CARRABS REAL ESTATE LIMITED PARTNERSHIP
Ref. Number: W16000074435

RECEIVED
2016 DEC 19 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CARRABS REAL ESTATE LIMITED PARTNERSHIP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 616A00025930

Corrected.
SS



*Received
Jan 13, 2017*

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2016

SHERRON PERMASHWAR, CPA
BMP TAX AND ACCOUNTING, INC.
125 SOUTH STATE RD 7, STE. 104-203
WELLINGTON, FL 33414

SUBJECT: CARRABS REAL ESTATE LIMITED PARTNERSHIP
Ref. Number: W16000074435

We have received your document for CARRABS REAL ESTATE LIMITED PARTNERSHIP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 516A00027247

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carrabs Real Estate Limited Partnership

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:

Sherron Permashwar, CPA

Contact Person

BMP Tax and Accounting, Inc

Firm/Company

125 South State Road 7 Ste 104-230

Address

Wellington, FL 33414

City, State and Zip Code

Sherron@bmptaxcpa.com

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

For further information concerning this matter, please call:

Sherron Permashwar, CPA at (**561**) **306-0775**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees
(S965 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

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

FILED
2017 JAN 13 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Carrabs Real Estate Limited Partnership

(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.

Carrab Real Estate LP

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. Canada

State or Country of Formation

3. February 24, 2016

Date of Formation

4. Federal Employer Identification Number: _____

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

Sherron Permashwar CPA

125 South State Road 7 Ste 104-230

Wellington, FL 33414

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:

4095 State Road 7 Ste L-106

Wellington, FL 33449

8. Mailing Address:

4095 State Road 7 Ste L-106

Wellington, FL 33449

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: Carrabs Real Estate GP Inc.

Name of General Partner: _____

Street Address: 1339 10th Sideroad

Street Address: _____

Tottenham, Ontario Canada L0G1W0

Mailing Address: 4095 State Road 7 Ste L-106

Mailing Address: _____

Wellington, FL 33449

Name of General Partner: Michael Carrabs

Name of General Partner: _____

Street Address: 4095 State Road 7 Ste L-106

Street Address: _____

Wellington, FL 33449

Mailing Address: _____

Mailing Address: _____

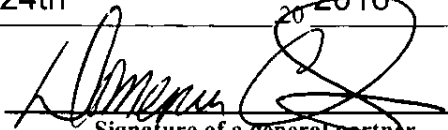
Name of General Partner: _____ Name of General Partner: _____
 Street Address: _____ Street Address: _____
 Mailing Address: _____ Mailing Address: _____

FILED
 2017 JAN 13 PM 5:01
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

11. Effective date, if other than the date of filing, November 2, 2016
 (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 October day of 24th 2016


 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

Request ID: 019592058
Transaction ID: 62737262
Category ID: (B)CC/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2016/11/15
Time Report Produced: 09:30:45
Page: 1

Certified a true copy of the record on the Ontario Business Information System with respect to this registration/declaration under the *Business Names Act/Limited Partnerships Act*.


Registrar
Ministry of Government Services
Toronto, Ontario

FILED
2017 JAN 13 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIPS REPORT

Firm name registered under the *Limited Partnerships Act*

CARRABS REAL ESTATE LIMITED PARTNERSHIP

Business Identification Number

260195367

Business Type

LIMITED PARTNERSHIP

Mailing Address

1339 10TH SIDEROAD

TOTTENHAM
ONTARIO
CANADA, L0G 1W0

General Nature of Business

INVESTMENT IN REAL ESTATE

Declaration Date

2016/02/24

Renewal Date

NOT APPLICABLE

Last Document Filed

NEW DECLARATION

Last Document Filed Date

2016/02/24

Former Names

NOT APPLICABLE

Address of Principal Place of Business in Ontario

1339 10TH SIDEROAD

TOTTENHAM
ONTARIO
CANADA, L0G 1W0

Jurisdiction of Formation

ONTARIO

Expiry Date

2021/02/23

Change Date(s)

NOT APPLICABLE

Dissolution/Withdrawal Date

NOT APPLICABLE

Current Partnership Business Names Exist:

NO

Expired Partnership Business Names Exist:

NO

Date of Name Change

Request ID: 019592058
Transaction ID: 62737262
Category ID: (B)CC/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2016/11/15
Time Report Produced: 09:30:45
Page: 2

Certified a true copy of the record on the Ontario Business Information System with respect to this registration/declaration under the *Business Names Act/Limited Partnerships Act*.


Registrar
Ministry of Government Services
Toronto, Ontario

LIMITED PARTNERSHIPS REPORT

FILED
2017 JAN 13 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Firm name registered under the *Limited Partnerships Act*

CARRABS REAL ESTATE LIMITED PARTNERSHIP

Business Identification Number

260195367

Business Type

LIMITED PARTNERSHIP

Information Regarding General Partner(s)

Name (Individual/Corporation/Other)

CARRABS REAL ESTATE GP INC.

Corporate Number: 2445392

Address

1339 10TH SIDEROAD

TOTTENHAM
ONTARIO
CANADA, L0G 1W0

Name of Signatory

CARRABS, DOMENICA

Power of Attorney

NO

Former Limited Partnership Names will only be displayed for Declarations registered on or after April 1, 1994.

This Report sets out the most recent information registered on or after April 1, 1994 and recorded in the Ontario Business Information System as of the last business day.



Ministry of Government and
Consumer Services

Ministère des Services gouvernementaux et
des Services aux consommateurs

Declaration Form 3
under the Limited Partnerships Act
Déclaration Formule 3
aux termes de la Loi sur les sociétés
en commandite

Page 1 of 2

Print clearly in CAPITAL LETTERS / Écrivez clairement en LETTRES MAJUSCULES

1. Declaration Type / Type de déclaration	A. <input checked="" type="checkbox"/> New / Nouvelle	B. <input type="checkbox"/> Name Change / Modification de la raison sociale	C. <input type="checkbox"/> Change (other than name change) / Changement (autre que modification de la raison sociale)
D. <input type="checkbox"/> Renewal Without Name Change / Renouvellement sans modification de la raison sociale	E. <input type="checkbox"/> Renewal With Name Change / Renouvellement avec modification de la raison sociale	F. <input type="checkbox"/> Dissolution / Dissolution	G. <input type="checkbox"/> Withdrawal / Retrait
Enter the Business Identification Number (BIN) for all Declaration Types except Type A. / Entrez le n° d'identification de l'entreprise (NIE) pour tous les types de déclaration, sauf pour le type A.		BIN (Business Identification No.) / NIE N° d'identification de l'entreprise	

2. Firm Name / Raison sociale de la société en commandite

CARRABS REAL ESTATE LIMITED PARTNERSHIP

3. Mailing Address of Registrant / Adresse postale de registrant

Street No. / N° de rue: 1339
Street Name / Nom de la rue: 10TH SIDEROAD
City / Town / Ville: TOTTENHAM
Province / Province: ONTARIO
Country / Pays: CANADA
Postal Code / Code postal: LOG 1W0

4. Address of Principal Place of Business in Ontario / Adresse de l'établissement principal en Ontario

☒ Same as above / comme ci-dessus
☐ Extra-Provincial Limited Partnership without business address in Ontario / Société en commandite extraprovinciale sans établissement en Ontario

Street No. / N° de rue: 1339
Street Name / Nom de la rue: 10TH SIDEROAD
City / Town / Ville: TOTTENHAM
Province / Province: ONTARIO
Country / Pays: CANADA
Postal Code / Code postal: LOG 1W0

5. General Nature of Business / Nature générale de l'activité exercée

INVESTMENT IN REAL ESTATE

6. Information Regarding General Partner(s) / Renseignements sur le ou les commandités

(A) Individual / Personne physique - Last Name / Nom de famille: DOMENICA First Name / Prénom: CARRABS Middle Name / Autre prénom:	(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale: CARRABS REAL ESTATE GP INC. Ontario Corporation Number / N° matricule de la personne morale en Ontario: 2445392
Street No. / N° de rue: 1339 Street Name / Nom de la rue: 10TH SIDEROAD City / Town / Ville: TOTTENHAM Province / Province: ONTARIO Country / Pays: CANADA Postal Code / Code postal: LOG 1W0	
Signature of General Partner or Attorney for the General Partner / Signature du commandité ou de son procureur: [Signature] Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act. / Cochez la case ci-contre si le signataire est le procureur du commandité (art. 32 de la Loi): <input type="checkbox"/>	
Print Name of Signatory / Nom du signataire en lettres moulées: DOMENICA CARRABS, DIRECTOR	
For a new Declaration, name change or renewal, Item 6 must be completed and signed by all the general partners or their attorneys. If there is more than one general partner, set out the total number of partners in the box and attach additional schedule(s). / Pour une nouvelle Déclaration, une modification de la raison sociale ou un renouvellement, il faut remplir la section 6 pour chaque commandité, et chaque commandité ou son procureur doit signer la section 6. S'il y a plus d'un commandité, entrez le nombre total de commandités dans la case ci-contre et remplissez et joignez une ou des annexes.	
Number of General Partners / Nombre de commandités: 1	

7. Jurisdiction of Formation / Territoire d'origine

ONTARIO

Extra-Provincial Limited Partnership Carrying on Business in Ontario / Société en commandite extraprovinciale menant des activités en Ontario

8. Information Regarding Attorney/Representative for an Extra-Provincial Limited Partnership - (Does not apply to limited partnerships formed in another Canadian jurisdiction that have an office or other place of business in Ontario) / Renseignements sur le procureur / représentant de la société en commandite extraprovinciale - (Ne s'applique pas aux sociétés en commandite d'un autre territoire canadien qui ont un établissement en Ontario)

Power of Attorney - Check the box to confirm there is an executed Power of Attorney (Form 4) appointing the person/corporation listed below to be the attorney and representative in Ontario. The attorney/representative is required to keep the executed Form 4 available for inspection at the address set out below. / Procuration - Cochez la case ci-contre pour confirmer qu'il y a une Procuration signée (Formule 4) nommant la personne physique ou morale indiquée ci-dessous à titre de procureur et représentant en Ontario. Celui-ci doit tenir la Formule 4 signée à disposition aux fins d'inspection à l'adresse ci-dessous.		MINISTRY USE ONLY - RÉSERVÉ AU MINISTÈRE BIN/EIN: 260195367 NAME: CARRABS RE REG/ENR: 2016-02-24 EXP/EXP: 2021-02-23
Attorney / Representative - Procureur / représentant		
(A) Individual / Personne physique - Last Name / Nom de famille: DOMENICA First Name / Prénom: CARRABS Middle Name / Autre prénom:		
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale: CARRABS REAL ESTATE GP INC. Ontario Corporation Number / N° matricule de la personne morale en Ontario: 2445392		
Street No. / N° de rue: 1339 Street Name / Nom de la rue: 10TH SIDEROAD City / Town / Ville: TOTTENHAM Province / Province: ONTARIO Country / Pays: CANADA Postal Code / Code postal: LOG 1W0		