

B17000000054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

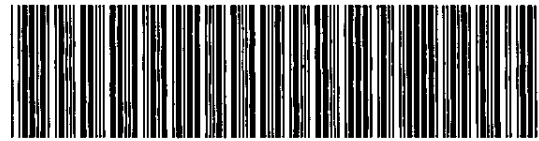
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-86625

Office Use Only



800293568078

12/27/16--01012--005 **1008.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2017 FEB 27 P 4 19

FILED

S Warren
FEB 28 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2017

PAUL NACE
4890 LAKE WATERFORD WAY W #4
MELBOURNE, FL 32901

SUBJECT: PAUL AND MELISSA NACE
Ref. Number: W16000086625

We have received your document for PAUL AND MELISSA NACE and your check(s) totaling \$1008.75. However, the document has not been filed and is being retained in this office for the following:

I RECEIVED YOUR UPDATED FORM, HOWEVER I STILL NEED THE CERTIFICATE OF GOOD STANDING FROM PENNSYLVANIA.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 717A00000683



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2016

PAUL NACE
4890 LAKE WATERFORD WAY W #4
MELBOURNE, FL 32901

SUBJECT: PAUL AND MELISSA NACE
Ref. Number: W16000086625

We have received your document for PAUL AND MELISSA NACE and your check(s) totaling \$1008.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 416A00027676

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Paul + Melissa Nace
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:

Paul Nace
Contact Person
NACE Appliance Repair + Service
Firm/Company
4890 Lake Waterford Way W. #4
Address
Melbourne FL 32901
City, State and Zip Code
NACEAPPLIANCE@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Nace at (321) 417-4654
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	<input checked="" 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

1. Nace Appliance Repair LP

(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. Pennsylvania

State or Country of Formation

3. 10/01/2007

Date of Formation

4. Federal Employer Identification Number: 26-1503153

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

Paul Nace

4890 Lake Waterford Way W #4

Melbourne FL 32901

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.

Paul Nace

Signature of Registered Agent

7. Principal Office:

4890 Lake Waterford Way W

#4

Melbourne FL 32901

8. Mailing Address:

4890 Lake Waterford Way W

#4

Melbourne FL 32901

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: Paul W. Nace

Name of General Partner: Melissa Nace

Street Address: 4890 Lake Waterford Way
W. #4 Melbourne FL 32901

Street Address: 4890 Lake Waterford Way W #4
Melbourne FL 32901

Mailing Address: Same

Mailing Address: Same

Name of General Partner:

Name of General Partner:

Street Address:

Street Address:

Mailing Address:

Mailing Address:

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TREASURY
FLORIDA
2007 OCT 27 P 4:19

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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: 10/01/2016
 (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 22 day of December, 20 16.

Paul W. Nae
 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

FILED
 2017 FEB 27 P 4:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

02/21/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Nace Appliance Repair

is duly registered as a Pennsylvania Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Pedro A. Contes

Secretary of the Commonwealth

Certification Number: TSC170221181383-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>