B1700000006

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	- e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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February 21, 2017

TIM FOULKE 7070 EMPIRE CENTRAL DRIVE #13 HOUSTON, TX 77040

SUBJECT: GUTTERMAXX, L.P. Ref. Number: W17000014952

We have received your document for GUTTERMAXX, L.P. and your check(s) totaling \$1061.25. 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.

Stacey M Warren Regulatory Specialist II

Letter Number: 017A00003352

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT:	Gutter	max1 LP ership or Limited Liability	Limited Partnership
The enclosed application, copartnership to transact busin Please return all correspond	ness in Florida.		a foreign limited partnership or limited liability limited
Tim F	Oulke Contact Person	u = u = u	
	maxx LP Firm/Company		
7070 Em	Pice Centra		
Honston	Address 7 State and Zip Code	7040	
E-mail address: (to be use	d for future annual report	nayh, Com notification)	
For further information con-	cerning this matter, pleas	e call:	
Name of Contact I			76-9171 X217 me Telephone Number
Enclosed is a check for the	following amount:		
(\$965 Filing Fee and	\$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 Circ	ile	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

Tallahassee, FL 32301

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

1. Guttermath LP	
(Name of Limited Partnership or Limited Liability Li Acceptable Limited Partnership suffixes: Limited Partnership, Li Acceptable Limited Liability Limited Partnership suffixes: Limite	mited, L.P., LP, or Ltd.
If name unavailable, name under which the limited partnership o	or limited liability limited partnership proposes to register to transact at contain acceptable suffix.
•	Po.00
2. leyas, USA State or Country of Formation	Date of Formation
4. Federal Employer Identification Number: 71-087	0938
5. Name of Registered Agent for Service of Process and Florid	a Street Address:
David Leaver	
_	ORA ORA
1902 N 43M St, SuiteC	DA T
Tanpa, FL 33605	en e
	to act in this capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obligations of
Signature of F	Registered Agent
7. Principal Office: 8. 1	Mailing Address:
GUTTERMAXX	GUTTERMAXX
7070 B EMPIRE CENTRAL DR. HOUSTON, TEXAS 77040	7070 B EMPIRE CENTRAL DR. HOUSTON, TEXAS 77040
9. If limited partnership is a limited liability limited partnersh	nip, check box .
10. Name, principal office address, and mailing address of each	
Name of General Partner: Gatter Management I	Name of General Partner: Frank Fulco
Street Address: 7070 Empre Carla Dr.	Street Address: 7070 Empire Central Dr. #B
morning Houston TX 77040	HORSTON. TY 77040
Million Address 7070 Em Brea Cantral DC	Mailing Address: 7070 Empire Central Or, #B
•	_
Houston, TX 77040	,
	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:

Name of General Partner:		Name of General Partner:		
Street Address:		Street Address:		
Mailing Address:		Mailing Address:		
12. Attached is a certificate of existe Florida Department of State, by the	nce duly authenticated, not mor	e than 90 days prio	r to the delivery of this application to the of the entity's records in the jurisdiction under	
the law of which it is organized. Signed this				
The individual signing this documer submitted in a document to the Depa	it affirm that the facts stated here	ein are true and the	individual is aware that false information provided for in s.817.155. F.S.	
Filing Fees: Certified Copy (o		0.00 (\$965 Filing F	Fee and \$35 Registered Agent Fee)	

Page 2 of 2

occidiaty of office



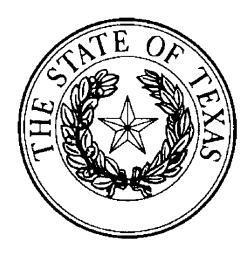
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for GUTTERMAXX, L.P. (file number 800064313), a Domestic Limited Partnership (LP), was filed in this office on March 13, 2002.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 15, 2017.





Rolando B. Pablos Secretary of State