

(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:





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02/28/17--01023--003 **1000.00

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SECRELARY OF STATE
SECRELARY OF STATE

D. SCOTT MAR 2 2 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2017

RHONDA CLARY 360 HIATT DR PALM BEACH GARDENS, FL 33418

SUBJECT: LRP MAGAZINE GROUP

Ref. Number: W17000017613

We have received your document for LRP MAGAZINE GROUP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please provide limited partnership suffix at the end of the business name.,

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 917A00003963



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

լ LRP Magazine Group 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.

	limited liability limited partnership proposes to register to transact contain acceptable suffix.
2. Pennsylvania	3. 01/01/1998
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number: 23-2503606	
5. Name of Registered Agent for Service of Process and Florida Kenneth Kahn	Street Address:
360 Hiatt Drive	
Palm Beach Gardens, FL 33418	
of all statutes relative to the proper and complete performance my position as registered agent.	to act in this capacity. I further agree to comply with the provisions of my duties, and Fam familiar with and accept the obligations of legistered Agent
, -	Mailing Address:
•	60 Hiatt Drive
	alm Beach Gardens, FL 33418
9. If limited partnership is a limited liability limited partnersh	ip, check box .
10. Name, principal office address, and mailing address of each Name of General Partner: LRP Publications, Inc.	h general partner:
Street Address: 360 Hiatt Drive	Street Address: 360 Hiatt Drive
Palm Beach Gardens, FL 3341	
Mailing Address:	Mailing Address:
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:

	Page 1 of 2	
Name of General Pa	rtner:Name of General Partner:	
Street Address:	Street Address:	
— Mailing Address:	Mailing Address:	
11. Effective date, if other than the date of filing: 02/03/2017 (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 certific Florida Department of Sthe law of which it is or	ate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the tate, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under ganized.	
Signed this 24	th day of February ,20 17.	
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

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COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

02/10/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

LRP Magazine Group

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

Secretary of the Commonwealth

Certification Number: TSC170210090282-1

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