

3/27/2017

Division of Corporations

Florida Department of State

Electronic Filing Cover Sheet

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(((H17000084136 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)288-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LP/LLLP
Klurman Investment Limited Partnership

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

PLEASE HONOR ORIGINAL SUBMISSION DATE OF 3/27/2017

Electronic Filing Menu

Corporate Filing Menu

Help

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

1. KLURMAN INVESTMENT 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.

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. Delaware 3. July 10, 1998
 State or Country of Formation Date of Formation

4. Federal Employer Identification Number: 65-0848521

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

CT Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

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.

By: CT Corporation System
Peter Trawinski, Asst. Secretary
 Signature of Registered Agent

7. Principal Office:

4601 Sheridan Street, Suite 600

Hollywood, FL 33021

8. Mailing Address:

4601 Sheridan Street, Suite 600

Hollywood, FL 33021

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: Klurman GP Corp. Name of General Partner: _____

Street Address: 4601 Sheridan Street, Ste #600 Street Address: _____

Hollywood, FL 33021

Mailing Address: SAME Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

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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: January 2, 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 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 6th day of February, 20 17


Signature of a general partner
Harvey L. Wichtman, Treasurer - Klurman GP Corp.

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, P.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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Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "KLURMAN INVESTMENT LIMITED
PARTNERSHIP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE
AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE
RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MARCH,
A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.

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SECRETARY OF
TALLAHASSEE, FLORIDA
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Jeffrey W. Bullock, Secretary of State

Authentication: 202288494

Date: 03-29-17

850-617-6381

5/9/2017 11:15:57 AM PAGE 1/001 Fax Server



May 9, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: KLURMAN INVESTMENT LIMITED PARTNERSHIP
REF: W17000039699

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

If you have any further questions concerning your document, please call (850) 245-6051.

Dionne M Pijaux
Regulatory Specialist
Registration Section

FAX Aud. #: H17000084136
Letter Number: 817A00009151

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