# B22000000408

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer:		
Rech 22		

Office Use Only



900390855519

01 18/21--11011--004 \*•1001.00

2028 AUG -5 Fin (2: 44

AUG 10 2022 M. SOLOMON

#### COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: TDL Realty Limited Partnership				
Name of Foreign Limited Par	tnership or Limite	d Liability	Limited Partnership	
The enclosed application, certificate of status and partnership to transact business in Florida. Please return all correspondence concerning this n		to register	a foreign limited partnership or l	limited liability limited
Warren J Roy CPA				
Contact Person		<u> </u>		
Roy & Spamer PA				
Firm/Company				
455 NE 5th Ave D293				
Address				
Delray Beach, FI 33483				
City, State and Zip Code				
wjroy1@gmail.com				
E-mail address: (to be used for future annual rep-	ort notification)			* E 255
For further information concerning this matter, ple	ase call:			2622 AUG
Warren J Roy CPA	at (	253-95	70	
Name of Contact Person	_ \	and Daytii	me Telephone Number	•
Enclosed is a check for the following amount:				PH 121 H1
■\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee)	s □\$1,052,50 F and Certific	_	□S1.061.25 Filing Fee, Certified Copy, and Certificate of Status	9 44
Mailing Address:		Street A	Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

TDL Realty Limited Partnership

Acceptable Limited Partnership suffixes: Limited Partner.	pility Limited Partnership, which must include suffix) ship, Limited, L.P., LP, or Ltd.  Limited Liability Limited Partnership, L.L.L.P. or LLLP.	_	
	ership or limited liability limited partnership proposes to rida; must contain acceptable suffix.	egister to t	ransact
Massachusetts	3. 2/13/2007		
State or Country of Formation	Date of Formation	_	
Federal Employer Identification Number: 20-844845	9		
8. Name of Registered Agent for Service of Process and			
Warren J Roy CPA			
455 NE 5th Avenue D293			
Delray Beach, FL 33483			
	d agree to act in this capacity. I further agree to comply to comply to comply the function of my duties, and I am familiar with and accept the second of the function of the		
Signat	ure of Registered Agent	. *	
7. Principal Office:	Mailing Address:		. 30.¥
85 NE 4th Ave	185 NE 4th Ave		Ω, T
Delray Beach FL 33483	Delray Beach FL 33843	 	
_			14 :SI 93
). If limited partnership is a limited liability limited pa	artnership, check box.		£
0. Name, principal office address, and mailing address	ss of each general partner:		
Name of General Partner: TDL Management Service	LES LL Name of General Partner:		
185 NE Jih Ave	Street Address:		
Delray Beach FL 33483			
Mailing Address: 185 NE 4th Ave	Mailing Address:		
Delray Beach FL 33483	Maning Address.		
Name of General Partner:	Name of General Partner:		
	Street Address:		
	Mailing Address:		

#### Page 1 of 2

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
	90 days after the dateIthis document is filed by the Florida Department of State.) neet the applicable statutory filing requirements, this date will not be listed as the
	henticated, not more than 90 days prior to the delivery of this application to the State or other official having custody of the entity's records in the jurisdiction under
Signed this 779 day of 1	July 20 22
	(Signature of a general partner

The individual signing this document affirms 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):

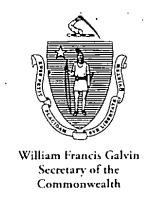
\$52.50

Certificate of Status (optional):

\$8.75

Page 2 of 2

2022 AUG -5 Pri 12: 44



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

June 28, 2022

To Whom it May Concern:

I hereby certify that according to the records in this office, a Certificate of Formation of Limited Partnership was filed in this office by

#### TDL REALTY LIMITED PARTNERSHIP

in accordance with the provisions of Massachusetts General Laws, Chapter 109, on **February 13, 2007**.

I further certify that said Limited Partnership has filed all annual reports due and paid all fees with respect to such reports; that said Limited Partnership has not filed a Certificate of Cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 109, § 64 for said Limited Partnership's dissolution; and that, so far as appears of record, said Limited Partnership has legal existence and is in good standing with this office.

I also certify that the names of the General Partners as listed in the most recent filings are as follows:

TDL MANAGEMENT LLC 185 NE 4<sup>th</sup> Ave Delray Beach, FL 33483 USA



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Tranin Galein



July 22, 2022

WARREN J ROY CPA ROY & SPAMER PA 455 NE 5TH AVE D293 DELRAY BEACH, FL 33483

SUBJECT: TDL REALTY LIMITED PARTNERSHIP

Ref. Number: W22000095968

We have received your document for TDL REALTY LIMITED PARTNERSHIP and check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The company listed as the General Partner must have an active registration on http://www.sunbiz.org

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

Mel Solomon Senior Section Administrator

RECEIVED RECEIVED

Letter Number: 622A00016423