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S. FRANKLIN AUG 2 5 2022

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Agatha Bloompetal Enterprises, LLLP		
Name of Foreign Limited Partnership or Limi	ited Liability Limited Partnership	
The enclosed application, certificate of status and fees are submitted partnership to transact business in Florida. Please return all correspondence concerning this matter to:	ed to register a foreign limited partnership or limited liability limited	
Richard H. Friedman		
Contact Person		
Agatha Bloompetal Enterprises		
Firm/Company		
141 Bon Chateau Dr		
Address		
St. Louis, MO 63141		
City. State and Zip Code	. 	
dick@serviceskills.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Richard H. Friedman	276-1012	
	ode and Daytime Telephone Number	
Enclosed is a check for the following amount:		
	O Filing Fees \$\Bigcup \text{\$\subseteq} \text	
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Division of Corporations	on o contra	

P.O. Box 6327

Tallahassee, FL 32314

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

Agatha Bioompetio	Eliterprises, Liller			
Acceptable Limited P	mited Partnership or Limited Liabi lartnership suffixes: Limited Partners. iability Limited Partnership suffixes:	hip, Limited, L.P., LP, or Lta	<u>!</u> .	
Agatha Bloompetal E				
If name unavailable	, name under which the limited partne business in Florid	rship or limited liability limit la; must contain acceptable s	ted partnership proposes to register to transact uffix.	
, Missouri		3. 01/27/2000		
# ·	ate or Country of Formation		ate of Formation	
4. Federal Employe	r Identification Number: 43-1876837		_	
	ed Agent for Service of Process and			
Ryan C. Bahn				
100750 Overseas Hig	ghway			
Key Largo, FL 3303	7			
6. I hereby accept th of all statutes rela my position as reg	ntive to the proper and complete perfor istered agent.	d agree to act in this capacity rmance of my duties, and I average of Registered Agent	: I further agree to comply with the provisions of familiar with and accept the obligations of	
7. Principal Office:		8. Mailing Address:		
306 Falaise Dr. St. I	Louis, MO 63141.	306 Falaise Dr., St. Lou	Falaise Dr., St. Louis, MO 63141.	
9. If limited partne	rship is a limited liability limited pa	rtnership, check box.		
10. Name, principa	l office address, and mailing addres			
Name of Genera	Richard H. Friedman	Name of General	Partner: Nancy J. Friedman	
Street Address:	141 Bon Chateau Dr.		141 Bon Chateau Dr.	
	St. Louis, MO 63141		St. Louis, MO 63141	
Mailing Address:	141 Bon Chateau Dr.	Mailing Address:	141 Bon Chateau Dr.	
	St. Louis, MO 63141	<u> </u>	St. Louis, MO 63141	
Name of Genera	l Partner: Linda Steinberg	Name of General	Partner: David Friedman	
Street Address: _	306 Falaise Dr.	Street Address:	30 Hollenberg Ct.	
	St. Louis, MO 63141		Bridgeton, MO 63044	
Mailing Address	306 Falaise Dr.	Mailing Address	30 Hollenberg Ct.	
-	St. Louis, MO 63141		Bridgeton, MO 63044	

Page 1 of 2

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
It. Effective date, if other than the date of filing (Effective date cannot be prior to nor more than 8 Note: If the date inserted in this block does not make document's effective date on the Department of S	og:
Florida Department of State, by the Secretary of S	nenticated, 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 day of	De Dredvogt
	Signature of a general partner

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information

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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STATE OF MISSOURI



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

AGATHA BLOOMPETAL ENTERPRISES, L.L.L.P. LP0011300

was created under the laws of this State on the 27th day of January, 2000, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 19th day of July, 2022.

Secretary of State

OF MANAGED AND COLORS

Certification Number: CERT-07192022-0112