

B240600000010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

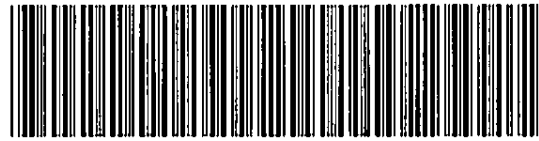
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01/22/24

CT CORP
(850) 656- 4724
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Tallahassee, FL 32312

Date: 01/22/2024
Acc#120160000072

en: c DW

Name:	MSC Partners, L.P.
Document #:	
Order #:	15296596 - 19

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
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Thank you!

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MSC Partners, L.P.

Name of Limited Partnership or Limited Liability Limited Partnership

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Richard Schloss

Contact Person

MSC Partners, L.P.

Firm/Company

3652 Voaro Way

Address

West Palm Beach, FL 33405

City, State and Zip Code

rps@rexford.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Schloss

at (917) 373-0265

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

\$61.25 Filing Fee
and Certificate of
Status

~~X~~\$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

Mailing Address:

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

Street Address:

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

STATE
FLORIDA
PH 2:42

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

MSC Partners, L.P.

Insert name currently on file with Florida Department of State

B24000000010

Florida Document Number of Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.

FIRST: The reason for filing this statement of correction is:

☒ The record contained false or erroneous information.

☐ The record was defectively signed.

SECOND: This statement corrects Application by Foreign Limited Partnership to Transact Business

Specify document type being corrected

filed with the Florida Department of State on January 11, 2024

Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows:

The Federal Employer Identification Number of MSC Partners, L.P. was stated to be 51-0006522.

FOURTH: The false or erroneous information or defect is corrected as follows:

The Federal Employer Identification Number of MSC Partners, L.P. is 13-3749469.

Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

DocuSigned by:
Richard Schloss
3499D66FGA5441D

Signature(s) of new general partner(s), if any:

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation below)

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.

Signature of Registered Agent

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

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