24000000116

(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. Recul					





300426172973

03/28/24 -01004--005 **1061.25

2024 APR 18 W. H: 46

M. SOLOMON APR 1 8 2024



COVER LETTER

	COVERL	LITEK	
TO: Registration Section Division of Corporations	•		
SUBJECT: 600 N. 4TH ST. ASSOCIATES,	. L.P.		
	Partnership or Limited	I Liability Limited Partnership	
The enclosed application, certificate of status a partnership to transact business in Florida. Please return all correspondence concerning the		to register a foreign limited partnership	or limited liability limited
PAUL ROSENBERG			
Contact Person		_	
ROSENBERG BROTHERS LLC			
Firm/Company		_	
102 NE 2ND STREET, #305			
Address		_	
BOCA RATON, FLORIDA 33432			22
City, State and Zip Code	<u> </u>	_	2024
Paul@Prosenberg.com			AF 1
E-mail address: (to be used for future annual	report notification)		ಸ್ <u></u> ಎ [
For further information concerning this matter,	please call;		
PAUL ROSENBERG	215 at (990-4244	
Name of Contact Person		and Daytime Telephone Number	### E
Enclosed is a check for the following amount:			
□\$1,000.00 Filing Fee □\$1,008.75 Filing and Certificate of		_	

Mailing Address:

\$35 Registered Agent

Fee)

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

Status

Street Address:

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

Certificate of Status

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

1 600 N. 4TH ST. ASSOCIATES, L.P.

(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. 3. JULY 10, 2002 , PENNSYLVANIA State or Country of Formation Date of Formation 4. Federal Employer Identification Number: 38-3936783 5. Name of Registered Agent for Service of Process and Florida Street Address: PAUL ROSENBERG 1515 N FEDERAL HWY, SUITE 402 BOCA RATON, FLORIDA 33432-1954 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, Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 1919 CHESTNUT STREET 102 NE 2ND STREET **SUITE 2908** #305 PHILADELPHIA, PA 19103 BOCA RATON, FLORIDA 33432 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:_______Name of General Partner:______ 1919 CHESTNUT STREET, SUITE 2908 Street Address: Street Address: PHILADELPHIA, PA 19103 102 NE 2ND STREET, #305 Mailing Address: Mailing Address: BOCA RATON, FLORIDA 33432 Name of General Partner: Name of General Partner: Street Address: _____ Street Address: _____ Mailing Address: _____ Mailing Address: _____

Name of General Part	ner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address:		Mailing Address:	
Note: If the date inserted document's effective date 12. Attached is a certifica florida Department of Sta	in this block does not meet the appli on the Department of State's record te of existence duly authenticated, no ac, by the Secretary of State or other	the date this document is filed by the Florida Department of State, cable statutory filing requirements, this date will not be listed as the s. of more than 90 days prior to the delivery of this application to the official having custody of the entity's records in the jurisdiction u	ıc
he law of which it is orga	nized. day of MARCH	.20 24	
	Signatu	re of a general partner	
		ted herein are true and the individual is aware that false informatios a third degree felony as provided for in s.817.155, F.S.	ın
	ees: d Copy (optional): ate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fec) \$52.50 \$8.75	
	!	Page 2 of 2	

2024 ACR 13 ETH: 46

Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding: 600 N. 4TH ST. ASSOCIATES, L.P.

Request Type: Subsistence Certificate Issuance Date: March 20, 2024

Request No.: 032663629 File No.: 0003082576

Receipt No.: 000964581

Filing Type: Domestic Limited Partnership

(LP/LLLP)

Filing Subtype: Limited Partnership

Initial Filing Date: July 10, 2002

Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

600 N. 4TH ST. ASSOCIATES, L.P.

is currently subsisting on the records of the Department of State as of the issuance 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 my office to be affixed, the day and year above written

Albert Schmidt

Secretary of the Commonwealth

1165 Sehn 3

Verify this certificate online at www.file.dos.pa.gov

Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Entity Name: 600 N. 4TH ST. ASSOCIATES, L.P.

Jurisdiction: PENNSYLVANIA Issuance Date: 03/19/2024

Entity No.: 0003082576 Receipt No.: 000960550

Entity Type: Domestic Limited Partnership Certificate No.: 032488536

(LP/LLLP)

Document Listing

Image No.			Filing Description	No. of Pages
A2599076-1	07/10/2002	07/10/2002	Initial Filing	2
	** **** ****	** ******** End o	flist ****** *****	**** **

I, Albert Schmidt, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the attached document(s) referenced above are true and correct copies and were filed in this office on the date(s) indicated above.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

ALBERT SCHMIDT

Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov

PAUL ROSENBERG 102 NE 2ND STREET #305 BOCA RATON FL 33432

April 18, 2024

RE: Foreign Registration of 600 N. 4th St Associates, LP

This letter acknowledges that we have a Foreign Limited Liability Company in the name of 600 N. 4th St Associates, LLC registered in the State of Florida and that we would also like to have a Foreign Limited Partnership in the name of 600 N. 4th St Associates, LP registered in the State of Florida.

Thank you

Paul Rosenberg