

B25000000023

(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:

Office Use Only



400441752854

01/02/25-01012--002 **1000.00

RECEIVED
DEC 30 2024

APPROVED
AND
FILED
2024 DEC 30 AM 10:02
JAN 16 2025

JAN 16 2025

K. Brumbley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAMFORD LIMITED PARTNERSHIP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

BARRY I. GALITZER

Contact Person

STAMFORD LIMITED PARTNERSHIP

Firm/Company

5208 SW 33RD WAY

Address

FORT LAUDERDALE , FL 33312

City, State and Zip Code

barry@galitzer.com

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

For further information concerning this matter, please call:

BARRY I. GALITZER at () (954) 491-0510

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fee ☐ \$1,008.75 Filing Fees ☐ \$1,052.50 Filing Fees ☐ \$1,061.25 Filing Fee,
(S965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and
\$35 Registered Agent Status Certificate of Status
Fee)

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

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

1. STAMFORD 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. GEORGIA

State or Country of Formation

3. 01/08/2016

Date of Formation

4. Federal Employer Identification Number: 26-0206134

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

BARRY I. GALITZER

5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

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:

5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

8. Mailing Address:

5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

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: BARRY I GALITZER

Street Address: 5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

Mailing Address: 5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

Name of General Partner: JILLIAN S. GALITZER

Street Address: 5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

Mailing Address: 5208 SW 33RD WAY

FORT LAUDERDALE, FL 33312

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

APPROVED
AND
FILED

2024 DEC 30 AM 10:00

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

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

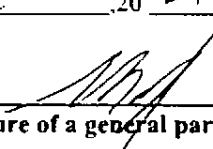
11. Effective date, if other than the date of filing: 12/05/2024

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 5th day of December, 2024



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

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

STAMFORD LIMITED PARTNERSHIP

a Domestic Limited Partnership

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 28272613
Date Inc/Auth/Filed: 05/10/2007
Jurisdiction : Georgia
Print Date : 12/23/2024
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State