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LINDA A. LAWSON

Attorney At Law
866 99th Avenue North
Naples, Florida 33963

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August 14, 1995

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sent LPAE
12/1/95.

RECEIVED
SEP 15 1995

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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***1837.50 ***1837.50

Re: MBR Partners, L.P.

Dear Sir/Madam:

Enclosed please find an original and duplicate Application By Foreign Limited Partnership For Authorization To Transact Business in Florida. Also enclosed is a check in the amount of \$1,837.50 to cover the capital contribution fee of \$1,750.00, \$35.00 for designation of registered agent and an additional \$52.50 for a certified copy of the certificate. Please forward the certificate to the above letterhead.

Please contact the undersigned at the above address and telephone number if you have any questions.

Thank you for your cooperation.

Sincerely,

Linda A. Lawson
Linda A. Lawson

TC \$300,000.00

Name	Yut
Availability	8/15/95
Document Examiner	Yut
Updater	Yut
Updater Verifier	Yut
Acknowledgement	Yut
W. P. Verifier	Yut

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FILING 1750.00
C. COPY 52.50
R. AGENT 35.00
TOTAL 1837.50
BALANCE DUE \$
REFUND \$

Sandra B. Mortham, Secretary of State

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

1. MBR PARTNERS, L.P.

(Name of limited partnership as it is in the home state;

2. MBR PARTNERS, LTD.

(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware

(State of Formation)

4.

February 1, 1995

(Date of Formation)

LINDA A. LAWSON, ESQ.

5.

(Name of Registered Agent for Service of Process)

866 99th Avenue North

6.

(Street Address of Registered Office)

Naples

(City)

, Florida 33963

(Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

Linda A. Lawson

(Agent must sign on this line)

8. Corporation Service Co., 1013 Centre Rd., Wilmington, Delaware 19805
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

SPECIFIC ADDRESS

M-3 Partners, Inc., 5551 Ridgewood Drive, Ste. 203, Naples, FL 33963

894000072622

10. 5551 Ridgewood Drive, Ste. 203, Napl , FL 33963

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

12. 5551 Ridgewood Drive, Ste.203, Naples, FL 33963
(Mailing Address of Limited Partnership)

This 14 day of August, 1995.

Richard F. Corace
M-3 Partners, Inc. General Partner, By: Richard F. Corace
Its: President

STATE OF FLORIDA

COUNTY OF COLLIER

THE FOREGOING instrument was acknowledged and sworn to before me this 14 day

of August, 1995, by Richard F. Corace, President of
M-3 Partners, Inc. of
(Name of General Partner)

MBR PARTNERS, LTD.

(Name of Limited Partnership)

, a Delaware

Limited Partnership, on behalf of Delaware

(State or Country)

Limited Partnership.

Linda A. Lawson

Notary Public



LINDA A. LAWSON
My Comm Exp. 3/23/98
Bonded By Service Ins
No. CC358724

☒ Personally Known ☐ Other L.D.

State of FLORIDA at Large

(SEAL)

My Commission Expires: _____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

Richard F. Corace, as President
BEFORE ME the undersigned personally appeared of M-3 Partners, Inc. a general
partner of MBR PARTNERS, L.P., a (an) Delaware limited partnership,
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 285,000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 300,000.00.

This 14 day of August, 1995.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

[Signature]
M-3 Partners, Inc. General Partner, By: Richard F. Corace,
Its: President

State of FLORIDA

County of COLLIER

Date 8-14-95

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Richard F. Corace, President of M-3 Partners, Inc. (General Partner), known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 14 day of August, 1995.

[Signature]

Notary Public

Seal



LINDA A. LAWSON
My Comm Exp. 3/23/98
Bonded By Service Ins
No. CC358724

☒ Personally Known ☐ Other L.D.

State of Florida at Large

My commission expires: _____

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Murrell
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 DEC 29 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #

MER Partners, LP
dba MER Partners, Ltd.

095000000 366

Mailing Address

Principal Office Address

5551 Ridgewood Dr
Suite 203
Naples, FL 33963

SAME

2. New Mailing Address, if Applicable

State, Apt. #, etc.

City, State & Zip

800001683988

-01/10/96--01046-046

2a. New Principal Office

State, Apt. #, etc.

City, State & Zip

3. Date Formed or Registered to Do Business in

FLORIDA

3a. Date of Last Report

4. State or Country of Formation

10/16/95

Delaware

5a. Capital Contributions as Shown on Record

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number

\$300,000

☒ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☒

8. FEES: 1.) Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2.) Supplemental Fee: \$138.75 (pursuant to section 107.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent's Office

Pamela S. MacKie
5551 Ridgewood Drive Ste 201
Naples, FL 33963

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner (Do NOT Use Post Office Box Number)

11b. City, State & Zip Code

11c. Registration Document Number

M-3 Partners, Inc.

5551 Ridgewood Dr
Ste 203
Naples, FL 33963

P940000762

Notes: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I hereby certify that the information supplied with this filing is true and correct, and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability for any consequences arising from this filing. I further certify that the information supplied is exempt from public access. I further certify that the information indicated on this annual report is true and correct, and that any such information shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report pursuant to chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Telephone Number