

L12000076742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

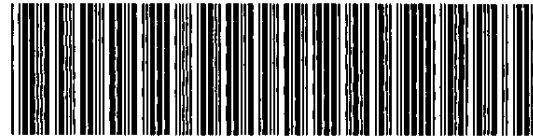
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MP BOSTON LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL LIPMAN
Name of Person
MP BOSTON LLC
Firm/Company
PO BOX 601306
Address
NORTH MIAMI BEACH, FL 33160
City/State and Zip Code
lipmania@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VAZHA PAPSON at (718) 986-6031
Name of Person Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MP BOSTON LLC.
2. This entity was formed under the laws of: DELAWARE.
3. This entity was authorized to transact business in Florida on 6/8/12
and its Florida document/registration number is L12000076742.
4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

CAROL LIPMAN
3330 NE 190th ST #2616
Aventura, FL 33180

MGR

VAZHA PAPSON
3330 NE 190th ST #2616
Aventura, FL 33180

MGR

MICHAEL PAPSON
3330 NE 190th ST #2616
Aventura, FL 33180

MGR

ALLIA BRICKMAN
3330 NE 190th ST #2616
Aventura, FL 33180

Required Signature: _____

Carol Lipman
Signature of Manager, Managing Member or Member

Filing Fee: \$25

12 JUL 12 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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