

04/25/2006 4:16

013-29-11

HOLLAND&KNIGHT

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Division of Corporations

Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : HOLLAND & KNIGHT
Account Number : 072100000016
Phone : (813) 227-8500
Fax Number : (813) 229-0134

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DIVISION OF CORPORATIONS
06 APR 26 AM 10:18

FLORIDA/FOREIGN LP/LLP

Oliva Investment Partnership, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$1,052.50

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J. BRYAN APR 27 2006

HO6000114544 3

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**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. OLIVA INVESTMENT PARTNERSHIP, LLP

(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.*

2. 904 Tomahawk Trail, Brandon Florida 33511

(Street address of initial designated office)

3. Robert J. Oliva

(Name of Registered Agent for Service of Process)

4. 904 Tomahawk Trail, Brandon Florida 33511

(Florida street address for Registered Agent)

5. *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.*

Robert J. Oliva
Signature of Registered Agent

6. 904 Tomahawk Trail, Brandon Florida 33511

(Mailing address of initial designated office)

7. If limited partnership elects to be a limited liability limited partnership, check box ☒

H06000114544 3

8. Name and business address of each general partner:

Name:

Business Address:

Oliva Management Company, LLC

904 Tomahawk Trail

#LD0000039878

Brandon Florida 33511

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
06 APR 26 AM 10:18

9. Effective date, if other than the date of filing: _____

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

Signed this 24th day of April, 2006

Signature of each general partner:

OLIVA MANAGEMENT COMPANY, LLC

Robert J. Oliva

Its Member: Robert J. Oliva

Adela M. Oliva

Its Member: Adela M. Oliva

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

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FLORIDA/FOREIGN LP/LLP

INFOMERCIAL FUND I, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

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J. BRYAN APR 27 2006

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DIVISION OF CORPORATION

H06000114555 3

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. INPOMERIAL FUND I, LLLP

(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.

2. 2001 West Sample Road, Suite 101

(Street address of initial designated office)

Pompano Beach, FL 33064

3. Mark Alfieri

(Name of Registered Agent for Service of Process)

4. 2001 West Sample Road, Suite 101

(Florida street address for Registered Agent)

Pompano Beach, FL 33064

5. *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 an accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 2001 West Sample Road, Suite 101

(Mailing address of initial designated office)

Pompano Beach, FL 33064

7. If limited partnership elects to be a limited liability limited partnership, check box ☒

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8. Name and business address of each general partner:

Name:

Business Address:

DRTV CAPITAL GROUP, LLC

2001 West Sample Road, Suite 101

#L05000078667

Pompano Beach, FL 33064

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9. Effective date, if other than the date of filing:

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

Signed this 26th day of April, 2006

Signature of each general partner:

DRTV CAPITAL GROUP, LLC,
General Partner

By:

Mark Allieri, Managing Member

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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