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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

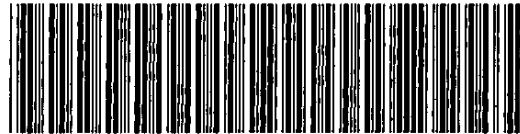
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2007 APR 17 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ingwersen & Taylor, LLP

Attorneys at Law

1200 Ashwood Parkway, Suite 300
Atlanta, GA 30338-4747
(770) 393-4933 FAX: (770) 393-4935

April 13, 2007

PRIVATE & CONFIDENTIAL

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

RE: EITEL INVESTMENTS, LLLP

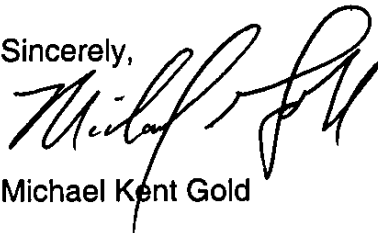
Dear Sir or Madam:

In accordance with the provisions of the Florida Revised Uniform Limited Partnership Act of 2005, enclosed are the following documents pertaining to the formation of Eitel Investments, LLLP

1. A check in the amount of \$1,052.50 payable to the Florida Department of State for filing fees, Registered Agent Fee, Certificate of Status and a Certified Copy;
2. Original and one copy of the Certificate of Limited Partnership, and;
3. A return envelope to the law firm of Ingwersen & Taylor.

For further information concerning this matter, please call me at (770) 393-4933.
Thank you for your assistance and cooperation in this matter.

Sincerely,



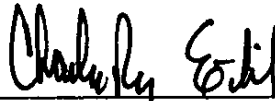
Michael Kent Gold

MKG:shc
Enclosures

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
EITEL INVESTMENTS, LLLP
A FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

The undersigned, desiring to form a limited liability limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act of 2005, Fla. Stat. § 620.1102-620.2205, do hereby certify as follows:

1. The name of the limited partnership is *Eitel Investments, LLLP*.
2. The street address of the initial designated office is *700 Kingston Drive, Naples, Florida 34102*.
3. The name of the Registered Agent for Service of Process is *Charles Roy Eitel*.
4. The street address for the Registered Agent is *700 Kingston Drive, Naples, Florida 34102*.
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.



CHARLES ROY EITEL, Registered Agent

6. The mailing address of the initial designated office is *700 Kingston Drive, Naples, Florida 34102*.
7. The limited partnership elects to be a limited liability limited partnership.
8. The name and business address of each general partner is as follows:

<u>Name</u>	<u>Business Address</u>
EITEL MANAGEMENT, LLC	700 Kingston Drive Naples, FL 34102

9. The effective date of this Certificate and the commencement of the term of the partnership shall be the date of filing of this Certificate.
10. The partnership shall have a perpetual duration.

IN WITNESS WHEREOF, the undersigned general partner has executed this Certificate on the 1ST day of JANUARY, 2007.



**CHARLES ROY EITEL,
Managing Member of General Partner,
EITEL MANAGEMENT, LLC**

2007 APR 17 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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