

A070000001375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

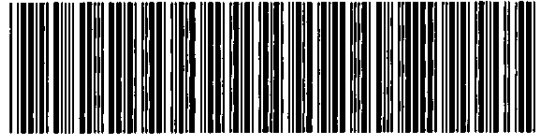
(Document Number)

Certified Copies _____

Certificates of Status _____

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

BRE 12/14



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December 14, 2007

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Dirigo One Limited Liability Limited Partnership

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other - Conversion

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

X LP

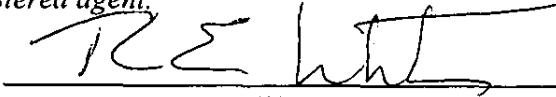
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SECRETARY OF STATE

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

FILED
07 DEC 14 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. **DIRIGO ONE LIMITED LIABILITY 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 LLP.
2. **909 Bearded Oaks Terrace**
(Street address of initial designated office)

Longwood, FL 32779
3. **Robert E. White**
(Name of Registered Agent for Service of Process)
4. **909 Bearded Oaks Terrace**
(Florida street address for Registered Agent)

Longwood, FL 32779
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.*

(Signature of Registered Agent)
6. **909 Bearded Oaks Terrace**
(Mailing address of initial designated office)

Longwood, FL 32779
7. If limited partnership elects to be a limited liability limited partnership, check box ☒.

8. Name and business address of each general partner:

Name

Address

Robert E. White

909 Bearded Oaks Terrace

Longwood, FL 32779

Dorothy A. White

909 Bearded Oaks Terrace

Longwood, FL 32779

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

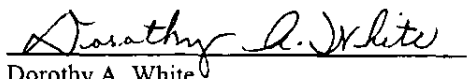
(Effective date cannot be prior to nor more than 90 days after the date the documents i filed by the Florida Department of State.)

Signed this 13th day of December, 2007.

Signature of each general partner:



Robert E. White



Dorothy A. White

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75