Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000187825 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (050)617-6383

From:

: DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, F.A. Account Name

Account Number : 076077001702 : (407)841-1200 Phone

Fax Number : (407)423-1831

FLORIDA/FOREIGN LP/LLLP

DEAGIP DEA Investments, LLLP

Certificate of Status	Û
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

LYD 028991/052346

Electronic Filing Menu

Corporate Filing Menu

M. THOMAS

SEP - 4 2009

EXAMINER

@002

850-517-6381

8/25/2009 8:57:05 AM PAGE

1/002

Fax Server



PLEASE SEE THE CORRECTED CERTIFICATE ATTACHED. WE REQUEST THE ORIGINAL DATE OF FILING-ON-AUGUST 24, 2009 AS THE EFFECTIVE DATE OF FILING.

August 25, 2009

DEAN MEAD ECERTON BLOODWORTH CAPOUANO BOZARTH PA

SUBJECT: DEA INVESTMENTS, LLLP

REF: W09000038113

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the Hame as, or it is not distinguishable from the name of an existing entity Section 608.406, Florida Statutes, was amended effective July 1, 2007, require the name of a limited liability company to be discussionally the names of all other filings filed with the Division of Corporations, require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporation except for fictitious name registrations and general partnership

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note the name of a limited liability company must end with the wordso Limited Liability Company, the abbreviation L.L.C., or the fesignation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no Longer acceptable: L.C., Limited Company, and LC.

Urlease return your document, along with a copy of this letter, within 60 (days or your filing will be considered abandoned.

If you Have any questions concerning the filing of your document, please call (810) 245-6097.

FAX Aud. #: H09000187825

09/03/2009 10:35 FAX 407 4231831 DEAN MEAD ORLANDO 850-617-6381 8/25/2009 8:57:05 AM PAGE

2/002

Fax Server

Ø003

Regulatory Specialist II

Letter Number: 909A00028566

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

cceptable Limit	mited Partnership or Limited Liability Limited Partnership, which must included Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. ed Liability Limited Partnership suffixes: Limited Liability Limited Liability suffixes: Limited Liability s	
	800 N. Magnolia Ave., Suite 1500	IAL TAL
	(Street address of initial designated office)	——i-CF
	Orlando, Florida 32803	SECRETARY LLAHASSE
	Dean Mead Services, LLC	SEE
	(Name of Registered Agent for Service of Process)	- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-
_	800 N. Magnolia Ave., Suite 1500	STA OR
	(Florida street address for Registered Agent)	<u> </u>
	Orlando, Florida 32803	
omply with the ,	pt the appointment as registered agent and agree to act in this capacity. I fur provisions of all statutes relative to the proper and complete performance of n with and accept the obligations of my position as registered agent. By: Dean, Mrad et. al By: Signature of Registered Agent	
	P. O. Box 952768	
	(Mailing address of initial designated office)	
•	(*	

Page 1 of 2

DEAN MEAD ORLANDO (((H09000187825 3)))

8. Name and business address of each g	general partner: <u>Business Address:</u>	
DEAGP, LLC , OA	800 N. Magnolia Ave., Suit <u>e 1500</u>	
DEAGP, LLC 991	Orlando, Florida 32803	
	SECO	2009
	HASIA	Aug
	SEE THE	7 7
	FL	至口
	RATE OF	
		7
9. Effective date, if other than the date of filing	:	
(Effective date cannot be prior to nor m filed by the Florida Department of State	ore than 90 days after the date the document is e.)	
Signed this 21 st day of	August , 2009	
Signature of each general partner:	DEAGP, LLC . O	
	By: Dauana (ence Sail	ax
	Damaris Aroc Savage, Trustee of the Damaris Arce Savage Revoca	ble Kust
	By: Carmen ave	
	,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)	

Page 2 of 2

\$8.75

Certificate of Status (optional):