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Account Number: 076424003301 Phone: (813)223-7474 Fax Number: (813)227-0435

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FLORIDA/FOREIGN LP/LLLP Deacon Six Limited Partnership, LLLP

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G. MCLEOD

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EXAMINER

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

	ted Partnership or Limited Liability Limited Partnership, which must include suffix)	
Acceptable Limited or LLLP.	Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.	
2	201 N. Franklin Street, Suite 3200	
	(Street address of Initial designated office)	
	Tampa, Florida 33602	
3	TK Registered Agent, Inc.	
	(Name of Registered Agent for Service of Process)	
4.	101 E. Kennedy Boulevard, Suite 2700	•
	(Florida street address for Registered Agent)	
	Tampa, Florida 33602	
comply with the pro	the appointment as registered agent and agree to act in this capacity. I further agree to visions of all statutes relative to the proper and camplete performance of my duties, ith and accept the obligations of my position as registered agent. TK Registered Agent, Inc. By: When the proper and camplete performance of my duties, ith and accept the obligations of my position as registered agent.	SECRE
	Nightfure of Registered A 466f	□
6	201 N. Franklin Street, Suite 3200 (Mailing address of initial designated office)	
	(washing address of initial designated office)	\Box
	Tampa, Florida 33602	25

8. Name and business address of each g	eneral partner: <u>Business Address:</u>
Deacon GP, LLC	201 N. Franklin Street, Suite 3200
	Tampa, FL 33602
,	
9. Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor mo filed by the Florida Department of State.	ore than 90 days after the date the document is)
Signed this 18th day of	December 2009
Signature of each general partner;	
Deacon GP, LLC	
By Ayane Damaha	A Samela
manager	manager
	000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) 2.50 75

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