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.

(((H100002148303)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BROAD AND CASSEL (BOCA RATON)

Account Number : 076376001555 Phone ; (561)483-7000

Fax Number : (561)483-7321

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

rhwood3@verizon.net Email Address:

FLORIDA/FOREIGN LP/LLLP Dogwood Ventures, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

J. SAULSBERRY EXAMINER

SEP 3 0 2010

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Corporate Filing Menu

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Fax Audit No. H10000214830 3

COVER LETTER					
TO: Registration Section Division of Corporations					
SUBJECT: Dogwood Ventures, LLIP Name of Florida Limited Partnership or Limited Liability Limited Partnership					
The enclosed Certificate of Limited Partnership and fees are submitted for filing.					
Please return all correspondence concerning this matter to:					
Tennifer Zakin Contact Person Broad and Cas sel Firm/Company					
Broad and Cassel Pirm/Company					
7771 Glades Road, Suite 300					
Boca Raton, FL 33434.					
Boca Raton, FL 33434 City, State and Zip Code Jzakin & Broadandcassel - Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Temifer ZakiN at (561) 218 - 885 9 Name of Contact Person Area Code and Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$1,000.00 Filing Fees \$1,008.75 Filing Fees \$1,052.50 Filing Fees \$1,061.25 Filing Fees, (\$965 Filing Fee and and Certificate of and Certified Copy and \$35 Registered Agent Status \$1,052.50 Filing Fees Certificate of Status \$1,052.50 Filing Fees Certificate of Status					
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					
CR2E030 (01/06)					

Fax Audit No. H10000214830 3

Fax Audit No: H10000214830 3

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

1. Dogwood Ventures, 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. 5490 Highlands Vista Circle (Street address of initial designated office)	-
Lakeland, FL 33813	-
3. Robert H. Wood (Name of Rogistored Agent for Service of Process)	2010 \$
(Name of Registered Agent for Service of Process)	SEP T
4. 6490 High lands Visha Circle (Florida street address for Registered Agent)	29
Lakeland, FL 33813	3 [
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 duffies, and I am familiar with and accept the obligations of my position as registered agent.	် ၁၀ - က်
Robert H. Whorl	
Signature of Registered Agent	
6. 5490 Highlands Visha Circle (Mailing address of initial designated office)	-
Lakeland, FL 33813	_
7. If limited partnership elects to be a limited liability limited partnership, check box	

Page 1 of 2

Fax Audit No. H10000214830 3

8. Name and business address of each g	<u>Business Add</u>				
Dogwood General Partie	, uc	5490 Highland, FI	ds Visl 3381	4 Ci 13	rcle
9. Effective date, if other than the date of filling:			TALLIAHASSEEL FLORIDY	2010 SEP 29 PM 3: 50	FILED
(Effective date cannot be prior to nor mofiled by the Florida Department of State. Signed this 29 th day of Signature of each general partner: Robert H. West	september				
	2,50	rec and 333 Registered A	gent reej		

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