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To:

Division of Corporations
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From: **Carrie L. Ramos, Paralegal, please fax confirmation to (407) 244-5690**

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : 120010000078
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Doug de Well, LLLP

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H11000171935 3

CERTIFICATE OF LIMITED LIABILITY
LIMITED PARTNERSHIP
DOUG DE WELL, LLLP

1. Name of Partnership. The name of the limited liability limited partnership is:

Doug de Well, LLLP
2. Office. The street address of the initial office is:

4359 Ponca Avenue
Toluca Lake, CA 91602
3. Agent for Service of Process. The name and address for the agent for service of process on the Partnership is:

Lisa H. Lipman, Esq.
c/o GrayRobinson, P.A.
5551 Ridgewood Drive, Suite 101
Naples, FL 34108
4. Term. This Partnership shall be perpetual.
5. Limited Liability Limited Partnership. The Partnership has elected to be a limited liability limited partnership.
6. Name and Business Address of each General Partner is:

Roderick Smith
4359 Ponca Avenue
Toluca Lake, CA 91602

Signed this 23 day of June, 2011.



Roderick Smith

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H11000171935 3

CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT

I hereby accept the appointment as registered agent for Doug de Well, LLLP and agree to act in this capacity.



Lisa H. Lipman, Esq.

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H11000171935 3