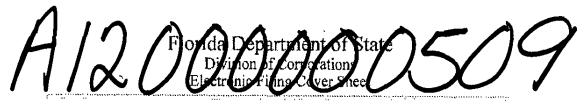
Division of Corporations

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(((H120002135083)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROFTZEL & ANDRESS

Account Number : 120000000121

· (239)649-6200

Phone Fax Number

· (239)261-3559

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

Email Address: MMCNatte Calaw com

## FLORIDA/FOREIGN LP/LLLP EDGEWOOD ISLE, LLLP

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Division of Corporations

FLORIDA DEPARTMENT OF STATE

ROETZEL & ANDRES

August 28, 2012

SUBJECT: EDGEWOOD ISLE, LLLP

REF: W12000044469

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 limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

The document number of the name conflict is L01000003237.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please 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 (850) 245-6051.

Tammi Cline Regulatory Specialist II FAX Aud. #: H12000213508 Letter Number: 412A00021903 12 AUG 29 PH I2: 25
SECRETARY OF STATE
TALL A HASSEF FI FRID

## APPROVED

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

(((H12000213508 3)))

1 DCP Edgewood Isle, LLLP	
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include naffix).  Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd.  Acceptable Educated Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or LLLP.  2.1658 Main Street W, Unit 25	
Hamilton, Ontario Canada L85 1G5	
3. R & A Agents, Inc. (Attention: Michael W. McNatt) (Name of Registered Agent for Service of Process)	
4420 South Orange Avenue, Floor 7, Orlando, FL 32801	
(Plorida street address for Registered Agent)	
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.  RANTENTS AC.  By:  Name:  Name:  Name:  Mailing address of initial designated office)	
(Mailing address of initial designated office)	
Hamilton, Ontario Canada L85 1G5	
7. If limited partnership elects to be a limited liability limited partnership, check box	

Page 1 of 2

12 AUG 29 PH 12: 25

(((H12000213508 3)))

B. Name and business address of Name:	Business Address:
Dundurn USA, Inc.	1658 Main Street W, Unit 25
	Hamilton, Ontario Canada L85 1G5
	P12000074351
······································	
Effective date, if other than the date of	filing:
iffective date cannot be prior to n led by the Florida Department of	or more than 90 days after the date the document is State.)
gned this 29 day	ofAugust ,2012
ned herein are true. I'We am/are	/We submit this document and affirm that the facts aware that any false information submitted in a te constitutes a third degree felony as provided for in
	Dundum USA Inc., a Florida comeration
	Or Kylin
	Robert Manherz, President
ling Fees: ertified Copy (optional):	\$1,000.00 (\$965 Filling Fee and \$35 Registered Agent Fee) \$52.50