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William T. Kirtley, P.A.  
Requestor's Name

2940 S. Tamiami Trail  
Address

Sarasota, FL 34239  
City/State/Zip Phone #

400002965254--8  
-08/20/99-01029-012  
\*\*\*\*743.75 \*\*\*\*743.75

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Title Partners of DeKalb - Atlanta, LTD  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

400002965254--8  
-08/20/99-01029-013  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

1999-19683

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

99 SEP -3 AM 8:53  
FILED  
SECRETARY OF STATE

with  
9/3



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

August 25, 1999

WILLIAM T. KIRTLEY, P.A.  
2940 S. TAMiami TRAIL  
SARASOTA, FL 34239

SUBJECT: TITLE PARTNERS OF DEKALB-ATLANTA, LTD.  
Ref. Number: W99000019683

We have received your document for TITLE PARTNERS OF DEKALB-ATLANTA, LTD. and your check(s) totaling \$752.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 partnership must have an active registration/filing on file with this office before this filing will 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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 899A00042597

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TITLE PARTNERS OF DEKALB-ATLANTA, LTD.**

**Certificate of Limited Partnership  
Pursuant to Chapter 620,  
Florida Statutes, as amended**

The undersigned, after being duly sworn, does hereby create a Limited Partnership formed and to exist in accordance with the provisions of Chapter 620, Florida Statutes, as amended, and hereby states as follows:

1. The name of the Limited Partnership is **TITLE PARTNERS OF DEKALB-ATLANTA, LTD.**

2. The location of the office of the Limited Partnership is 1400 Montreal Road, Tucker, Georgia 30084. The street address of the registered office of the Limited Partnership is 1715 North Westshore Boulevard, Suite 990, Tampa, Florida 33607 and the name of the registered agent of the Limited Partnership at that address is **TITLE PARTNERS OF AMERICA, INC.**

3. The name and place of residence of the General Partner is as follows:

Title Partners of America, Inc.  
Managing General Partner  
1715 North Westshore Blvd., Suite 990  
Tampa, Florida 33607

4. The mailing address for the Limited Partnership is: **TITLE PARTNERS OF DEKALB-ATLANTA, LTD., c/o Title Partners of America, Inc., Managing General Partner, 1715 North Westshore Boulevard, Suite 990, Tampa, Florida 33607.**

5. The term for which the Limited Partnership is to exist is from the date of this Certificate to December 31, 2019 unless sooner terminated in accordance with the provisions of the Agreement of Limited Partnership or in accordance with the provisions of Chapter 620, Florida Statutes, as amended.

This Certificate is dated the 16<sup>th</sup> day of August, 1999.

TITLE PARTNERS OF DEKALB-  
ATLANTA, LTD.

By TITLE PARTNERS OF AMERICA,  
INC., Managing General Partner

By Alan S. Greber, Inc.  
Alan S. Greber, President

The undersigned, having been designated in the foregoing Certificate of Limited Partnership as Registered Agent, hereby agrees to accept said designation.

TITLE PARTNERS OF AMERICA,  
INC.

By Alan S. Greber, Inc.  
Alan S. Greber, President

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SECRETARY OF STATE

AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The undersigned, being duly sworn, states and affirms as follows:

1. The undersigned, ALAN S. GREBER, is the President of TITLE PARTNERS OF AMERICA, INC., the Managing General Partner of TITLE PARTNERS OF DEKALB-ATLANTA, LTD.

2. The amount of cash capital contributions anticipated to be contributed by the Partners of the Limited Partnership at the conclusion of the initial capitalization of the Limited Partnership is \$100,000.

3. As of the date hereof, the Limited Partnership has received no capital contributions.

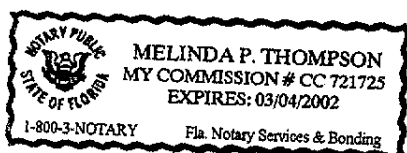
FURTHER AFFIANT SAYETH NOT.

Dated at Tampa, Florida this 16<sup>th</sup> day of August, 1999.

Alan S. Greber, Pres

Alan S. Greber, President of Title Partners of America, Inc., General Partner of TITLE PARTNERS OF DEKALB-ATLANTA, LTD.

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 1999 by Alan S. Greber, President of Title Partners of America, Inc., Managing General Partner of TITLE PARTNERS OF DEKALB-ATLANTA, LTD. who is personally known to me and who did take an oath.



Melinda P. Thompson  
Notary Public  
My Commission Expires: