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SECRETARY OF SIAIL GIVISION OF CORPORATIONS

J. BRYAN

JAN - 8 2008

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: DMC-Management Co., Ltd.

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: B0600000092

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Victor Alfano

(Contact Person)

National Corporate Services, LLC

(Firm/Company)

16055 Space Center Blvd., Ste. 235

(Address)

Houston, TX 77062

(City, State and Zip Code)

For further information concerning this matter, please call:

Victor Alfano

at (800

862-5438

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

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

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DIVISION OF CORPORATIONS

BY SECRETARY OF STATE ONS

BY SECRETARY OF STATE ONS

BY JAN -7 AM 8: 44



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 24, 2007

VICTOR ALFANO NATIONAL CORPORATE SERVICES, LLC 16055 SPACE CENTER BLVD., STE 235 HOUSTON, TX 77062

SUBJECT: DMC-MANAGEMENT CO., LTD.

Ref. Number: B06000000092

We have received your document for DMC-MANAGEMENT CO., LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A general partner must sign the document.

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) 245-6043.

Letter Number: 307A00071377

Joey Bryan Regulatory Specialist II SECRETARY OF STATIONS
EIVISION OF CORPORATIONS
08 JAN - 7 AM 8: 44



December 31, 2007

Florida Department of State Division of Corporations Attn: Joey Bryan P.O. Box 6327 Tallahassee, FL 32314

RE:

Town Center Condos, LP
Tampa Parkland Apartments, L.P.

DMC Tampa Parkland, L.P.

Universal Avenue Apartments, LP

DMC Baywater Apartments Limited Partnership

✓DMC Apartment Fund III, Ltd.

4DC Conventional-NOC, L.P.

✓ North Ocean Condos, L.P.

√DMC-Management Co., Ltd.

✓Orlando Apartments, LLC

Dear Mr. Bryan:

In response to your letters attached dated December 24, 2007, we are attaching the corrected documents for resubmission. Please let me know if you need anything further in connection with these filings in order to proceed.

As requested, a copy of each of your letters is attached. Thank you.

Very truly yours,

Victor Alfano Vice President

Encl.

REGISTERED AGENTS, INC.

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida

change its registered	i office of registered ago	one, or both, in the si	ate of Fiorida.		
լ DMC-Man	agement Co.,	, Ltd.			
Na	me of Limited Partnership	or Limited Liability I	imited Partnership		
2.2/27/2006		3. B(3. B060000092		
Date of filing	registration in Florida		Florida document number		
4. The name of the re Department of State:	gistered agent and the reg	istered office address	as shown on the reco	rds of the Florida	
	CT Corporati	on System			
		Name			
	1200 South F	Pine Island F	₹oad		
		Address		_	
	Plantation, FI	L 33324		8	
	City	y, State and Zip		JA SIGN	
5. The name and Flor	ida street address of the ne	ew registered agent an	d/or office:	OR JAN -7 AM 8: 44	
	NRAI Services, Inc	> .		2 3	
	" "	Name		== c ⇔ :	
	2731 Executive Park Drive, Suite 4				
	Florida street address (P.O. Box not acceptable)		eptable)	•	
	Weston	FI	_ 33331		
	City	y, State and Zip			
6. Such change(s) is/a	re effective when filed by	the Florida Departme	nt of State.		
Dom	in hood				
Signature of General F	Partner				
I hereby accept the ap comply with the provis	pointment as registered agains of all statutes relative an accept the obligations	e to the proper and co	mplete performance		
Filing Fee:	\$35.00				

Certified Copy (optional): \$52.50