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Florida Department of State  
Division of Corporations  
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## FLORIDA/FOREIGN LP/LLLP

## NEDI-One Limited Partnership

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$1,008.75

M. THOMAS

Electronic Filing Menu

Corporate Filing Menu

JUL 16 2008

EXAMINER

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA**

**1. NED1-One Limited Partnership**

(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 L.L.P.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)

**2. Delaware****3. 7/11/2008**

(State or Country of Formation)

(Date of Formation)

**4.**

Scott Shakespeare

(Name of Registered Agent for Service of Process)

**5.**

4630 North University Drive, Ste. 512

(Florida street address for Registered Agent)

Coral Springs, FL 33067

6. 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.

Scott Shakespeare

By:

Signature of Registered Agent  
Scott Shakespeare**7. 4630 North University Drive, Suite 512**

(Principal office address)

Coral Springs, Florida 33067

8. If limited partnership is a limited liability limited partnership, check box ☒

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9. 4630 North University Drive, Suite 512

(Mailing address)

Coral Springs Fl. 33067

10. Name, principal office address, and mailing address of each general partner:

Scott Shakespeare

(Name)

4630 North University Drive, Ste. 512

(Street Address)

Coral Springs, Fl. 33067

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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_____	_____
(Name)	(Street Address)
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_____	(Street Address)
(Name)	_____
_____	(Mailing Address)
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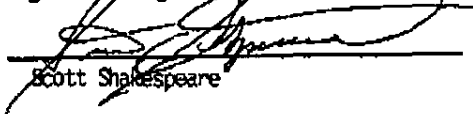
11. Effective date, if other than the date of filing: Upon filing

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 11 day of July 20 08

Signature of a general partner:

  
 \_\_\_\_\_  
 Scott Shakespeare

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

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# Delaware

PAGE 1

*The First State.*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEDI-ONE LIMITED PARTNERSHIP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEDI-ONE LIMITED PARTNERSHIP" WAS FORMED ON THE ELEVENTH DAY OF JULY, A.D. 2008.

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080778556

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State  
AUTHENTICATION: 6724985

DATE: 07-14-08