

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850)617-6383

## From:

Account Name : TREHAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.  
Account Number : 076424003301  
Phone : (813)223-7474  
Fax Number : (813)227-0435

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

Email Address: sharris@midcoastcapital.com

FLORIDA/FOREIGN LP/LLP  
DPE Investors VII, LP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

2021 JUL 22 AM 9:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDASECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 JUL 22 PM 4:08

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY  
JUL 23 2021

(((H21000279934 3)))

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

FILED  
2021 JUL 22 PM 4:00  
SECURITY  
TALLAHASSEE, FLORIDA

1. DPE Investors VII, LP

(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 LLLP.

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

State or Country of Formation

3. 07/21/2021

Date of Formation

4. Federal Employer Identification Number: 87-1768594

5. Name of Registered Agent for Service of Process and Florida Street Address:

Stephen W. Harris521 Mandalay Avenue, Unit 510Clearwater Beach, FL 33767

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.

  
Signature of Registered Agent

7. Principal Office:

521 Mandalay Avenue, Unit 510Clearwater Beach, FL 33767

8. Mailing Address:

521 Mandalay Avenue, Unit 510Clearwater Beach, FL 337679. If limited partnership is a limited liability limited partnership, check box. ☐

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

Name of General Partner: Midcoast Capital, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 521 Mandalay Avenue, Unit 510

Street Address: \_\_\_\_\_

Clearwater Beach, FL 33767Mailing Address: 521 Mandalay Avenue, Unit 510

Mailing Address: \_\_\_\_\_

Clearwater Beach, FL 33767

Name of General Partner: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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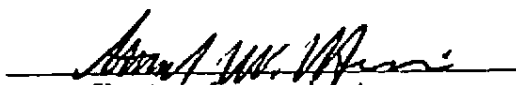
Page 1 of 2

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

11. Effective date, if other than the date of 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.)  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 21st day of July, 2021

  
Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

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2021 JUL 22 PM 4:03  
TALLAHASSEE, FLORIDA

(((H21000279934 3)))

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DPE INVESTORS VII, LP" 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 TWENTY-FIRST DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DPE INVESTORS VII, LP" WAS FORMED ON THE TWENTY-FIRST DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

FILED  
2021 JUL 22 PM 4:09  
STATE OF DELAWARE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

6099626 8300

SR# 20212764854

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

Authentication: 203729178

Date: 07-21-21