

B 22 000000187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

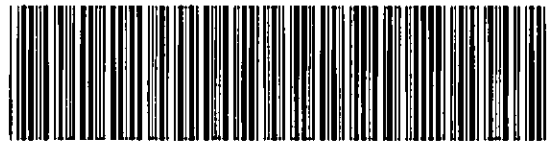
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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S. FRANKLIN

APR 23 2022

LP 1000.00
Get 60.25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dixie Partners II LP
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Jeanene Kennemer

Contact Person

Dixie Partners II LP

Firm/Company

P O Box 270874

Address

Flower Mound, TX 75027

City, State and Zip Code

jk@freedomtitletx.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeanene Kennemer

at 469

671-5803

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> \$1,000.00 Filing Fee
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input checked="" type="checkbox"/> \$1,061.25 Filing Fee,
Certified Copy, and
Certificate of Status |
|---|---|---|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2022 APR 11 PM 1:24

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

1. Dixie Partners II 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. Texas

State or Country of Formation

3. 07/12/2001

Date of Formation

4. Federal Employer Identification Number: 75-2955229

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

Terrance Sullivan

3718 N Roosevelt

Key West, FL 33040

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]
Signature of Registered Agent

7. Principal Office:

3624 Long Prairie Road, Suite 101

Flower Mound, TX 75022

8. Mailing Address:

PO Box 270874

Flower Mound, TX 75027-0874

9. 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: Laprechaun Investments LLC

Name of General Partner: _____

Street Address: 3624 Long Prairie Road Suite 101

Street Address: _____

Flower Mound, TX 75022

Mailing Address: PO Box 270874

Mailing Address: _____

Flower Mound, TX 75027

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

2022 APR 11 PM 1:24

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

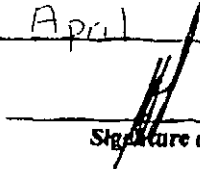
11. Effective date, if other than the date of filing: _____

(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 5 day of April, 2022


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

2022 APR 11 PM 1:24



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for DIXIE PARTNERS II, L.P. (file number 15384810), a Domestic Limited Partnership (LP), was filed in this office on July 12, 2001.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate JAMES MICHAEL KEVLIN as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

3624 LONG PRAIRIE ROAD
SUITE 101
FLOWER MOUND, TX - 75022 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 31, 2022.



[Handwritten signature]

John B. Scott
Secretary of State