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STEWART & EVANS, P.A. ATTORNEYS & COUNSELORS AT LAW 3355 OCEAN DRIVE VERO BEACH, FLORIDA 32963 (772) 231-3500

REBECCA F. EMMONS
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JOHN MITCHELL STEWART
WILLIAM J. STEWART

P. O. BOX 3345 VERO BEACH, FL 32964 Toll Free (866) 231-3500 Fax (772) 231-9876

rfemmons@st-ev.com

October 17, 2005

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

RE: DPM Management LLC

Dear Sir or Madam:

In regard to the above-captioned matter, enclosed for filing please find the following:

- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- Certificate of Designation of Registered Agent/Registered Office;
- Original Certificate of Good Standing issued by the State of Maryland, Department of Assessments and Taxation; and
- Check in the amount of \$160.00 for the filing fee, Certificate of Status and Certified Copy.

Should you have any question, please contact the undersigned.

Sincerely,

Rebecca F. Emmons

RFE:cm

Enclosures

cc: Dennis and Patricia Makielski, w/enc.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	DPM MANAGEMENT LLC					
		mite	d Liability Company)			
2.	MARYLAND	3.	52-2293573			
	(Jurisdiction under the law of which foreign limited liabili company is organized)		(FEI number, if appl	icable)		_
4.	2/1/2001	5.	12/31/2031			
	(Date of Organization)		(Duration: Year limited liability c exist or "perpetual")	ompany	will c	ease to
6.	(Date first transacted business (See sections 608.501 & 608.50					
7.	342 Broadview Lane					
	Annapolis, MD 21401					
	(Street Address	of F	Principal Office)			
	If limited liability company is a manager-managed comp	•	·			
9.	The name and usual business addresses of the managi	ng r	members or managers are as follow	ws:		
	DENNIS J MAKIELSKI 342 BROADVIEW LANE ANNAPOL	.IS N	MD 21401			
	PATRICIA MAKIELSKI 342 BROADVIEW LANE ANNAPOL	IS N	ID 21401			
10.	. Attached is an original certificate of existence, no more	thar	n 90 days old, duly authenticated by	y the off	icial h	aving
	stody of records in the jurisdiction under the law of which		• • • • • • • • • • • • • • • • • • • •	•		
cer	rtificate is in a foreign language, a translation of the certifi	cate	e under oath of the translator must	be subn	nitted.)
11.	. Nature of business or purposes to be conducted or pron	note	d in Florida:		050	
	PURCHASE LAND AND CONTRACT WITH A BUILDER TO	CO	NSTRUCT THEN SELL RESIDENTAL	L HOME	<u>s</u> 🖫	
	Du Thus	7		SET FL	1 PH 2	LED
	Signature of a member or an autho		•	울닭	12	_
	(In accordance with section 608.408(3), F.S			P	ယ	•
	an affirmation under the penalties of perjury	เกลเ	the racts stated nerein are true.)			
	DENNIS MAKIELSKI	4				
	Typed or prin	ted	name of signee			

52-2293573

ATX1

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
DPM	MANAGEMENT LLC
2.	The name and the Florida street address of the registered agent and office are:
	DENNIS J MAKIELSKI
	(Name)
	55520 NORTH HARBOR VILLAGE DR
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	VERO BEACH FL 32967
	City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT DPM MANAGEMENT LIMITED LIABILITY COMPANY IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 30, 2005.

Paul B. Anderson Charter Division

Faul B. Under



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097