# M070006662

(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



600109927376

10/08/07--01003--025 \*\*155.00

OT DCT-8 MID: 56

O7 OCT 12 PM 4: 01
SECRETARY OF STATE
ALL AHASSEE ELSAIE

## **LAZARUS**

CORPORATE FILING SERVICE

Examiner's Initials

3320 SW 87" AVENUE	1 200 E
MIAMI, FL 33165 (305) 552-5973	Office Use Only  MBER(S), (if known):
•	Office Use Only
CORPORATION NAME(S) & DOCUMENT NU	
DFHC CAPITAL PAR	TWERS, LIC 3
(Corporation Name)	(Document #)
7	
Corporation Name)	(Document #)
3	
(Corporation Name)	(Document #)
and the second s	
4. (Corporation Name)	(Document #)
Walk in Pick up time 2.00  Mail out Will wait - Pho	Certified Copy  tocopy  Certificate of Status
NEW FILINGS AMEN	NDMENTS
Not for Profit Limited Liability Domestication	mendment esignation of R.A., Officer/Director hange of Registered Agent issolution/Withdrawal lerger
OTHER FILINGS REGI	STRATION/QUALIFICATION
Fictitious Name  L R T	oreign imited Partnership leinstatement Trademark Other

CR2E031(7/97)



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2007

**LAZARUS** 

TALLAHASSEE, FL

SUBJECT: DFHE CAPITAL PARTNERS LLC

Ref. Number: W07000049707

OCT OF SCREEN OF OTHER SCREEN LURIDAY OF STREET OF STREE

We have received your document for DFHE CAPITAL PARTNERS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we are STILL RETAINING your \$155.00 payment.

We are sorry to have to return your filing a second time, but in Item 9 you must list both the NAMES and the ADDRESSES of the company's MANAGERS or MANAGING MEMBERS.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 107A00059884



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

07 OCT 11 AM 10: 44

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

TALLAHASSEF, FLORIOA

October 8, 2007

**LAZARUS** 

TALLAHASSEE, FL

SUBJECT: DFHE CAPITAL PARTNERS LLC

Ref. Number: W07000049707

We have received your document for DFHE CAPITAL PARTNERS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

If DFHE CAPITAL PARTNERS, LLC is a Delaware LLC, it must submit a FOREIGN LLC QUALIFICATION.

If you are actually just trying to form a new Florida LLC, then the Florida LLC application would be appropriate.,

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 407A00058827

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

	A STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINE	
Name of Foreign Limited Liability Company:	must include "Limited Liability Company," "L.L.C.," or "LLC.")
(	,,,,,,
(If name unavailable, enter alternate name adopted for consent of the managers or managing members adoptic Company," "L.L.C.," "LLC.")	the purpose of transacting business in Florida and attach a copy of the written ng the alternate name. The alternate name must include "Limited Liability
2. Delawore	3
(Jurisdiction under the law of which foreign limited company is organized)	3. (FEI number, if applicable)
	1.0 9 1
4. 9/26/07 (Date of Organization)	(Duration: Year limited liability company will cease it
·	exist or "perpetual")
6. (Date first transacted bus)	mess in Florida, if prior to registration.)
	mess in Florida, if prior to registration.) 08,502 F.S. to determine penalty liability)
7. 1260 Still water	r drive
Miami Morid	a 33141
8. If limited liability company is a manager-	<b></b> /
	f the managing members or managers are as follows:
1260 Still water de	3141  MERM) DERRICK EAGlin
Miami Florida 3	3141
10. Attached is an original certificate of existence, no morth in jurisdiction under the law of which it is organized. (a translation of the certificate under eath of the translation	one than 90 days old, duly authenticated by the official having custody of records in A photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)
11. Nature of business or purposes to be cor	nducted or promoted in Florida: Con Sultima
	(b)
Signature of a member	or or an authorned representative of a member. 508.408(3), F.S., the execution of this document constitutes
an affirmation under the pen	alties of perjury that the facts stated herein are true.)
<u> </u>	or printed name of signee

## 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:
DFHE Capital Partners LLC
If name unavailable, the alternate name to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Derrick Faglin
(Name)
1260 Stillwater drive Florida Street Address (P.O. Box NOT ACCEPTABLE)
Mami FL 33141 City/State/Zip
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.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DFHE CAPITAL PARTNERS LLC" 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-SIXTH DAY OF SEPTEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DFHE CAPITAL PARTNERS LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF SEPTEMBER,

A.D. 2007.

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

306

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6028730

DATE: 09-26-07

4429542

071053086