



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
04/09/2021	202108903310	LIMITED PARTNERSHIP REGISTRATION (CLP)	99.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

JAMES D WHITACRE
422 BEECHER ROAD
GAHANNA, OH 43230

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose
4649822

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
DEAN PARTNERS, L.P.

and, that said business records show the filing and recording of:

Document(s)

LIMITED PARTNERSHIP REGISTRATION

Effective Date: 03/31/2021

Document No(s):

202108903310



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
9th day of April, A.D. 2021.

Ohio Secretary of State

Form 531A Prescribed by:



Date Electronically Filed: 3/30/2021

Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.govFile online or for more information: OhioBusinessCentral.gov

Certificate of Domestic Limited Partnership
Filing Fee: \$99
(141-CLP)
Form Must Be Typed

Name of the Partnership

DEAN PARTNERS, L.P.

Name must include one of the following words or abbreviations: "Limited Partnership," "L.P.," "Limited." or "Ltd."

**Address of the
Partnership's Principal
Place of Business**

781 SCIENCE BLVD, SUITE 100

Mailing Address

GAHANNA

City

OH

State

43230

ZIP Code

**Effective Date
(Optional)**

3/31/2021

Date

(The status of the partnership as a limited partnership begins upon the filing of the certificate or on a later date specified that is not more than ninety days after filing)

Name and Address of Each General Partner**Name**

JAMES WHITACRE

Business or Residential Address

781 SCIENCE BLVD, SUITE 100 GAHANNA OHIO 43230

Original Appointment of Statutory Agent

The undersigned authorized representative(s) of

DEAN PARTNERS, L.P.

(Name of Limited Partnership)

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited partnership may be served. The complete address of the agent is:

JAMES WHITACRE

(Name of Statutory Agent)

781 SCIENCE BLVD, SUITE 100

(Mailing Address)

GAHANNA

(Mailing City)

OH

(Mailing State)

43230

(Mailing ZIP Code)

Acceptance of Appointment

The Undersigned, named herein as the statutory agent for

DEAN PARTNERS, L.P.

(Name of Limited Partnership)

hereby acknowledges and accepts the appointment of agent for said limited partnership.

JAMES WHITACRE

(Individual Agent's Signature / Signature on Behalf of Corporate Agent)

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Must be signed by all general partners.

If general partner is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If general partner is a business entity, not an individual, then please print the business name in the "signature" box, a general partner of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name