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CERTIFICATE OF LIMITED PARTNERSHIP î. UST ARLINGTON DOWNS, L.P. (Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership" 2. c/o Estein & Associates USA, Ltd., 4705 S. Apopka-Vineland Rd., Suite 201, Orlando, FL 32819 (Street address of initial designated office) 3. Corporation Company of Orlando (Name of Registered Agent for Service of Process) 4. 300 South Orange Avenue, Suite 1000 (J3S), Orlando, Florida 32801 (Florida street address for Registered Agent) 5. 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. J. Gregory Humphries, Vice President (Registered Agent must sign here to accept designation as Registered Agent for Service of Process) 6. 300 South Orange Avenue, Suite 1000, Orlando, Florida 3280 (Mailing address of initial designated office) If limited partnership elects to be a limited liability limited partnership, check box 7. 8. Name and business address of each general partner: Name: Business Address: Estein Management Corporation c/o Estein & Associates USA, Ltd. 4705 South Apopka-Vineland Road Suite 201 Orlando, Florida 32819 9. Effective date shall be the date of filing. Signed this Zinday of April, 2014. Signature of all general partners: Estein Management Corporation, sole general partner Name: Title: