

Certificate of Limited Partnership

A16000000449
FILED
August 31, 2016
Sec. Of State
ncausseaux

Name of Limited Partnership:
510 WINDROSE CIRCLE LP

Street Address of Limited Partnership:
510 WINDROSE CIRCLE
PENSACOLA, FL. US 32507

Mailing Address of Limited Partnership:
510 WINDROSE CIRCLE
PENSACOLA, FL. US 32507

The name and Florida street address of the registered agent is:
SUZANNE KAHN
510 WINDROSE CIRCLE
PENSACOLA, FL. 32507

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: SUZANNE KAHN

The name and address of all general partners are:

Title: G
SUZANNE KAHN
510 WINDROSE CIRCLE
PENSACOLA, FL. 32507

Signed this Thirty First day of August, 2016

I (we) declare the I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

General Partner Signature: SUZANNE KAHN

The individual(s) signing this document affirm(s) that the facts stated herein are true and the individual(s) is/are 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.