## **Certificate of Limited Partnership**

A23000000134 FILED March 15, 2023 Sec. Of State

Name of Limited Partnership:

COVE SALON & SPA STUDIOS LLLP

Street Address of Limited Partnership:

900 SW PINE ISLAND RD SUITE 208-209 CAPE CORAL, FL. 33991

Mailing Address of Limited Partnership:

1824 NW 21ST PL CAPE CORAL, FL. 33993

The name and Florida street address of the registered agent is:

MADISON MILLER 1824 NW 21ST PL CAPE CORAL, FL. 33993

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

Registered Agent Signature: MADISON MILLER

The name and address of all general partners are:

Title: G AMY SCHERBER 1821 NW 22ND AVE CAPE CORAL, FL. 33993

Title: G MADISON MILLER 1824 NW 21ST PL CAPE CORAL, FL. 33993

The effective date for this Limited Partnership shall be:

03/15/2023

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Fifteenth day of March, 2023

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: AMY SCHERBER General Partner Signature: MADISON MILLER

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.