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Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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FLORIDA/FOREIGN LP/LLP

Zohouri Seagrove, LP

Certificate of Status	0
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**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Zohouri Seagrove, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

2. 4001 Presidential Parkway, Suite 1512

(Street address of initial designated office)

Atlanta, GA 30340

3. C T Corporation System

(Name of Registered Agent for Service of Process)

1200 South Pine Island Road

4. _____

(Florida street address for Registered Agent)

Plantation, Florida 33324

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.



JOAN BOLDEN

Signature of Registered Agent ASSISTANT SECRETARY

6. 4001 Presidential Parkway, Suite 1512

(Mailing address of initial designated office)

Atlanta, GA 30340

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

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8. Name and business address of each general partner:

Name:Business Address:Zohouri Seagrove GP, LLC4001 Presidential ParkwayLC6000011776Suite 1512, Atlanta, GA 30340

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this _____ day of _____

Signature of each general partner:

Zohouri Seagrove GP, LLCBY: Fred Zohouri, ManagerSECRETARY OF STATE
TALLAHASSEE FLORIDA

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Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

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