

AUG-21-2007 08:15

GR ROBINSON

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Florida Department of State  
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To:

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## FLORIDA/FOREIGN LP/LLP

### HWP Partners, LLLP

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Help

**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Name of Limited Liability Limited Partnership, including suffix.

HWP Partners, LLLP

2. Street address of initial designated office

1011 North Wymore Road  
Winter Park, FL 32789

3. Name of Registered Agent for Service of Process

Pamela O. Price

4. Street Address for Registered Agent

301 East Pine Street, Suite 1400  
Orlando, FL 32801

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.



Signature of Registered Agent

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6. Mailing address of initial designated office.

P.O. Box 1720  
Winter Park, FL 32789

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

8. Name and business address of each general partner:

Name:

Business Address:

HWP Management, Inc.

1011 North Wymore Road  
Winter Park, FL 32789

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

Signed this 20<sup>th</sup> day of August, 2007:

Signature of each general partner:

HWP Management, Inc.

By: Juliette A. Holler

Juliette A. Holler, President

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