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Division of Corporations

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FLORIDA/FOREIGN LP/LLLP

Westphal Enterprises, LP

| Certificate of Status | 0 |
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| Certified Copy | Û |
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Electronic Filing Menu

Corporate Filing Menu

EXAMINER

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Westphal Enterprises, 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. 2 217 W. Seaview Drive (Street address of initial designated office) Duck Key, Florida 33050 3. Evelyn K. Westphal (Name of Registered Agent for Service of Process) 4,217 W. Seaview Drive (Florida street address for Registered Agent) Duck Key, Florida 33050 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. 6 217 W. Seaview Drive (Mailing address of initial designated office) Duck Key, Florida 33050 7. If limited partnership elects to be a limited liability limited partnership, check box

| Name and business address of each gene Name: Westphal Ventures GP, Inc. | Business Address: 217 W. Seaview Drive | | | |
|--|--|---------------------|---------------|--|
| PO8-25899 | Duck Key, Florida 33050 | | | |
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| 9. Effective date, if other than the date of filing: | | | L NHX | |
| (Effective date cannot be prior to nor more filed by the Florida Department of State.) | than 90 days after the c | date the docume | RY OF S | |
| Signed this <u>10th</u> day of | March | 2008 | OSIGN TATE | |
| Signature of each general partner: | · | |),;- | |
| | | | | |
| Filing Fees: \$1,00 Certified Copy (optional): \$52.5 Certificate of Status (optional): \$8.75 | | \$35 Registered Age | ent Fee) | |

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