

# **Certificate of Limited Partnership**

**A10000000040**  
**FILED**  
**January 21, 2010**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

JAKOB INVESTMENTS, LP

Street Address of Limited Partnership:

6215 SHADOW TREE LANE  
LAKE WORTH, FL. 33463

Mailing Address of Limited Partnership:

6215 SHADOW TREE LANE  
LAKE WORTH, FL. 33463

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

LENNY K SHWARTZ  
6215 SHADOW TREE LANE  
LAKE WORTH, FL. 33463

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

Registered Agent Signature: LENNY SHWARTZ

The name and address of all general partners are:

Title: G  
LENNY K SHWARTZ  
6215 SHADOW TREE LANE  
LAKE WORTH, FL. 33463

The effective date for this Limited Partnership shall be:

01/22/2010

Signed this Twenty First day of January, 2010

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: LENNY SHWARTZ