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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Maryta Family Limited Liability Limited Partnership

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Erlinda Hernandez	
Contact Person	
JONATHAN H. GREEN AND ASSOCIAT	E, P.A
Firm/Company	
799 Brickell Plaza Suite 700	
Address	
Miami Florida 33131	
City, State and Zip Code	
Eh@Jhglaw.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matt	er, please call:
Erlinda Hernandez	at (305) 372-5100
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amoun	ıt:
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy S1,061.25 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP

OF THE

MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

THIS CERTIFICATE is duly executed and filed pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as amended (the "Act"), in order to form a limited partnership under the Act.

- (a) Name. The name of the subject limited partnership is the MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP (the "Partnership").
- **Recordkeeping Office.** The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

14441 Ardoch Place Miami Lakes, Florida 33016

<u>Registered Agent: Registered Office</u>. The name and address of the agent for service of process on the Partnership required to be maintained under the Act are:

Jonathan H. Green & Associates, P.A. 799 Brickell Plaza, Suite 700 Miami, FL 33131

(c) <u>General Partner</u>. The names and business address of the Partner(s) are:

Valentin Lorenzo, Trustee

(d) <u>Mailing Address</u>. The mailing address of the Partnership is:

14441 Ardoch Place Miami Lakes, Florida 33016

(e) <u>Term</u>. The latest date upon which the Partnership is to dissolve is December 31, 2055.



(f) <u>Election</u>. If limited partnership elects to be a limited liability limited partnership, check box **D**.

IN WITNESS WHEREOF, the general partner has duly executed this

Certificate, this 24^{44} day of 2011.

WITNESSES:

Print name: Rock Tolky

Print name: Erlinda Harrande Z

VALENTIN LORENZO, Trustee, his successor(s) as trustee(s) of the Valentin Lorenzo Revocable Living Trust, General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS TO THE MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

The undersigned, the general partner of the MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, a Florida limited partnership, hereby certify that:

The amount of the capital contributions of the limited partners to date is:

\$0.00

The total amount anticipated to be contributed by the limited partners is:

\$5,000,000.00

FURTHER AFFIANTS SAYETH NOT.

Under penalties of perjury, the undersigned declare that he has read the foregoing and knows the contents of the foregoing, and that the facts stated in the foregoing are true and correct.

Dated: 5/24 , 2011.

WITNESSES:

Print name: Rock of Tal

VALENTIN LORENZO, Trustee, his successor(s) as trustee(s) of the Valentin Lorenzo Revocable Living Trust, General Partner

Print name: Erlindindez

CONSENT TO SERVE AS REGISTERED AGENT

FOR THE

MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Having been appointed to serve in the State of Florida as the registered agent of, and to accept service of process for, the MARYTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, the undersigned hereby accepts said appointment and agrees to serve as said registered agent. The undersigned further agrees to comply with the provisions of all Florida statutes relative to the proper and complete performance of the undersigned's duties, and hereby acknowledges that the undersigned is familiar with and accepts the obligation of the undersigned's position as said registered agent.

Dated: 5/24, 2011.

JONATHAN H. GREEN & ASSOCIATES, P.A.

a Florida Corporation

JONATHAN H. GREEN