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Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

EFFECTIVE DATE 12-9-11

From: Account Name : MCCARTHY, SUMMERS, BOBKO, WOOD, NORMAN, BASS & TAYLOR, P.A.  
Account Number : I19990000170  
Phone : (772) 286-1700  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: klm@McCarthySummers.com

FLORIDA/FOREIGN LP/LLLP  
Armstrong Family Partnership, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	04
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December 15, 2011

H11000294085

Florida Department of State  
Division of Corporations  
The Capitol  
P.O. Box 6327  
Tallahassee, Florida 32399-0250

RE: Certificate of Limited Partnership for Armstrong Family Partnership, LLLP

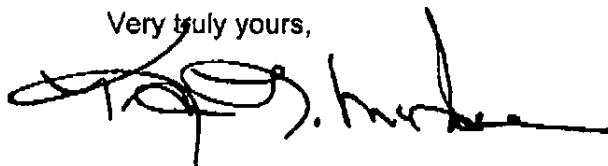
Ladies and Gentlemen:

With reference to the above company, enclosed please find Certificate of Limited Partnership for Florida Limited Liability Limited Partnership for filing.

Kindly fax to the undersigned proof of filing same.

Thank you.

Very truly yours,



Karen L. McGhee, CP, FRP  
Certified Paralegal  
Email: klm@McCarthySummers.com  
/klm  
Enclosure

Terence P. McCarthy \*  
Robert P. Summers \*  
Noel A. Bobko  
Steven J. Wood \*\*  
Kenneth A. Norman  
Kathryn C. Bass  
Patricia I. Taylor

Rose D. Schneider  
Rene S. Iosco  
Owen Schultz  
Christine Bialczak  
Michael J. McNicholas \*\*\*

\*Board Certified  
Real Estate Lawyer  
\*\*Board Certified Wills,  
Trusts & Estates Lawyer  
\*\*\*Certified Circuit  
Civil Mediator

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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

1. The name of the Limited Liability Limited Partnership is:

ARMSTRONG FAMILY PARTNERSHIP, LLLP

2. The mailing address of the initial designated office of the Limited Liability Limited Partnership is:

1515 Lancewood Terrace, Palm City, FL 34990

The street address of the initial designated office of the Limited Liability Limited Partnership is:

1515 Lancewood Terrace, Palm City, FL 34990

3. The name and address of the registered agent is:

Kenneth A. Norman  
2400 SE Federal Highway, Fourth Floor  
Stuart, FL 34994

4. The limited partnership elects to be a limited liability limited partnership.

5. The Name(s) and business address(es) of each general partner:

William J. Armstrong

1515 Lancewood Terrace  
Palm City, FL 34990

Elaine M. Armstrong

1515 Lancewood Terrace  
Palm City, FL 34990


6. The effective date, if other than the date of filing is Dec. 9, 201

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TALLAHASSEE, FLORIDA

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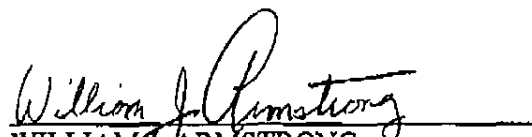
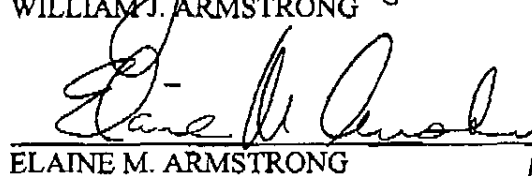
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
Kenneth A. Norman, Registered  
Agent

Signed this 9<sup>th</sup> day of December, 2011.

Signature of general partners:

We submit this document and affirm that the facts stated therein are true. We are aware that any false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in Florida Statutes Section 817.155.

  
WILLIAM J. ARMSTRONG  
  
ELAINE M. ARMSTRONG

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