

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000136923 3)))



H120001369233ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

. To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DRUMMOND WEHLE & ROSS LLP

Account Number: 120050000133
Phone: (813)983-8000
Fax Number: (813)983-8001

**Enter the email address for this business entity to be used for Edbure annual report mailings. Enter only one email address please.

mail Address: temple @ dwrf

2 MAY 22 PH 38 18 ECRETARY OF STATE LLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP Singh Family Operations, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,000.00

B. BOSTICK

MAY 2 3 2012

Electronic Filing Menu

Corporate Filing Menu

Help

EXAMINER

(((H12000136923 3)))

CERTIFICATE OF LIMITED PARTNERSHIP OF SINGH FAMILY OPERATIONS, LLLP

The undersigned, pursuant to the provisions of Chapter 620 of the Florida Statutes, for the purpose of forming a limited liability limited partnership under the laws of the State of Florida sets forth the following:

ARTICLE I: NAME

The Name of the Limited Liability Limited Partnership (the "Limited Partnership") is: Singh Family Operations, LLLP

ARTICLE II: ADDRESS

The street address of the initial designated office of the Limited Partnership is: 135 East First Street, Lakeland, Florida 33805.

The mailing address of the initial designated office of the Limited Partnership is: 135 East First Street, Lakeland, Florida 33805.

ARTICLE III: GENERAL PARTNERS

The name and business address of each general partner of the Limited Partnership is:

Name:

Business Address:

North Central Lakeland Real Estate Holdings, Inc.

135 East First Street Lakeland, Florida 33805

612000A

ARTICLE IV: LIMITED LIABILITY LIMITED PARTNERSHIP

The Limited Partnership elects to be a limited liability limited partnership.

ARTICLE V: EFFECTIVE DATE

The effective date of this certificate of limited pertnership is the date of filing of such certificate with the Florida Department of State.

{((H12000136923 3))}

ARTICLE VI: REGISTERED AGENT

The name and street address of the initial Registered Agent in Florida for the Limited Partnership is: Temple H. Drummond, Esq., Drummond Wehle & Ross LLP, 6987 East Fowler Avenue, Tampa, Florida 33617.

Having been named as registered agent and to accept service of process for the above stated Limited Liability Limited Partnership at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Temple H. Drummond, Esq., Registered Agent

May 22, 2012

Executed at Tampa, Florida on the 22rd day of May, 2012.

Temple/H. Drummond, Esq.,

Authorized Representative of General Partner

12 MAY 22 AM 8: 40