

Certificate of Limited Partnership

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FILED
June 08, 2012
Sec. Of State
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Name of Limited Partnership:

BIG WAVE FAMILY LIMITED PARTNERSHIP, LTD

Street Address of Limited Partnership:

40 ANTIGUA LANE
SANTA ROSA BEACH, FL. 32459

Mailing Address of Limited Partnership:

40 ANTIGUA LANE
SANTA ROSA BEACH, FL. 32459

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

ADRIAN D LOVELL JR.,
40 ANTIGUA LANE
SANTA ROSA BEACH, FL. 32459

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

Registered Agent Signature: ADRIAN D. LOVELL JR.

The name and address of all general partners are:

Title: G
ADRIAN D. LOVELL JR., PL
40 ANTIGUA LANE
SANTA ROSA BEACH, FL. 32459

Title: G
BARBARA LOVELL, PL
40 ANTIGUA LANE.
SANTA ROSA BEACH, FL. 32459

The effective date for this Limited Partnership shall be:

06/08/2012

Signed this Eighth day of June, 2012

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: ADRIAN D. LOVELL JR.

General Partner Signature: BARBARA LOVELL

The individual(s) signing this document affirm(s) that the facts stated herein are true and the individual(s) is/are aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.