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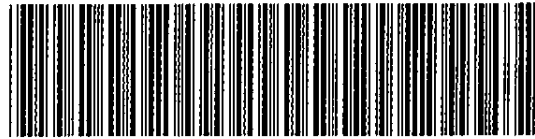
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Requestor's Name

2101 Corporate Blvd #107

Address

Boca Raton, FL 33431

City

State

ZIP

Phone

VALIDATION ONLY

CORPORATION(S) NAME

mimbres Partners, LLP

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| <input type="checkbox"/> Profit                         | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                      |  |   |
| <input type="checkbox"/> Foreign                        | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                       |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report   | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Reinstatement                  | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal     |
| <input type="checkbox"/> Call When Ready                | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30                 |
| <input checked="" type="checkbox"/> Walk In             | <input type="checkbox"/> Will Wait       | <input checked="" type="checkbox"/> Pick Up         |
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**CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP**

**OF**

**MIMBRES PARTNERS, LLLP**

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Pursuant to Florida Statutes Section 620.1201, the described limited liability limited partnership (sometimes also referred to as the "limited partnership") presents this Certificate for filing with the Florida Department of State.

**SECTION 1  
NAME**

The name of the limited partnership is MIMBRES PARTNERS, LLLP. The limited partnership elects to be a limited liability limited partnership.

**SECTION 2  
EXISTENCE**

The existence of the limited partnership shall commence upon the filing of this Certificate with the Florida Department of State.

**SECTION 3  
OFFICE ADDRESS**

The address of the office of the limited partnership is 5532 Fox Hollow Drive, Boca Raton, Florida 33486.

**SECTION 4  
AGENT FOR SERVICE OF PROCESS**

The agent for service of process for the limited partnership is M & W AGENTS, INC. at 2101 Corporate Blvd., Suite 107, Boca Raton, Florida 33431.

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TALLAHASSEE, FLORIDA

**SECTION 5  
GENERAL PARTNER**

The name and business address of the sole general partner of the limited partnership is:

**MIMBRES MANAGEMENT, LLC**  
5532 Fox Hollow Drive  
Boca Raton, Florida 33486

**SECTION 6  
MAILING ADDRESS**

The mailing address for the limited partnership is: 5532 Fox Hollow Drive, Boca Raton, Florida 33486.

**SECTION 7  
DATE OF DISSOLUTION**

The latest date upon which the limited partnership is to dissolve is December 31, 2062.

Executed this 2 day of August, 2012.

**MIMBRES MANAGEMENT, LLC**  
a Florida limited liability company, the  
General Partner

By: 

Jordan L. Klingsberg  
Authorized Representative

### REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for MIMBRES PARTNERS, LLLP at the place designated in the Certificate of Limited Partnership, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties, and the undersigned accepts the duties and obligations of Section 620.105 of the Florida Statutes.

Dated: August 2, 2012

M & W AGENTS, INC., a Florida corporation

By: 

Jordan L. Klingsberg, Authorized Officer