# Certificate of Limited Partnership

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FILED
September 18, 2012
Sec. Of State
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Name of Limited Partnership:

WIGGINS FAMILY LLLP

Street Address of Limited Partnership:

14024 NW HWY 441
ALAHCUA, FL. 32615

Mailing Address of Limited Partnership:

P.O. BOX 1857
ALACHUA, FL. 32616

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

JO V WIGGINS
14024 NW HWY 441
ALACHUA, FL. 32615

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

Registered Agent Signature: JO V WIGGINS

The name and address of all general partners are:

Title: G
JO V WIGGINS
14024 NW HWY 441
ALACHUA, FL. 32615

Title: G
HEATHER W FIELDS
14024 NW HWY 441
ALACHUA, FL. 32615

Title: G
AMANDA WIGGINS
14024 NW HWY 441
ALACHUA, FL. 32615

Title: G
ETHEL J WIGGINS TRUSTEE
14024 NW HWY 441
ALACHUA, FL. 32615

Title: G
ETHEL J WIGGINS TRUSTEE
14024 NW HWY 441
ALACHUA, FL. 32615

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The effective date for this Limited Partnership shall be:

09/18/2012

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Eighteenth day of September, 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: JO V WIGGINS

General Partner Signature: HEATHER WIGGINS FIELDS

General Partner Signature: AMANDA WIGGINS

General Partner Signature: ETHEL J WIGGINS TRUSTEE

General Partner Signature: ETHEL J WIGGINS TRUSTEE

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.