

# Certificate of Limited Partnership

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FILED  
March 14, 2013  
Sec. Of State  
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Name of Limited Partnership:

SOLIDARITY BENEFIT LIMITED LIABILITY LIMITED  
PARTNERSHIP

Street Address of Limited Partnership:

1206 DOMINGO DR  
TALLAHASSEE, FL. 32304

Mailing Address of Limited Partnership:

1172 FERN AVE.  
ORLANDO, FL. 32814

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

WLODZIMIERZ SEKULA  
1172 FERN AVE  
ORLANDO, FL. 32814

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

Registered Agent Signature: WLODZIMIERZ SEKULA

The name and address of all general partners are:

Title: G  
WLODZIMIERZ SEKULA  
1172 FERN AVE.  
ORLANDO, FL. 32814

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Fourteenth day of March, 2013

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: WLODZIMIERZ SEKULA

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.