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Account Name : GARY, DYTRYCH & RYAN, P.A.

Account Number: I19990000255 : (561)844-3700 Phone

Fax Number : (561)844-2388

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FLORIDA/FOREIGN LP/LLLP SBBG, LLLP

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P 2 FILED 2019 APR 26 AM 10: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1,	SBBG, LLLP
Acceptable Limited Parine	tnership or Limited Linbility Limited Partnership, which must include suffix) rship suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. by Limited Partnership suffixes: Limited Llability Limited Partnership, L.L.L.P.
2,	7711 N. MILITARY TRAIL SUITE 2/2. (Street address of initial designated office)
	u
	PALM BEACH GARDENS, FL. 33410
3.	GETERARD H SCHICKEDAYZ (Name of Registered Agent for Service of Process)
٧٠ <u></u>	(Name of Registered Agent for Service of Process)
4.	7711 N. MILLTARY TRAIL, SUITE 212
<u> </u>	(Florida street address for Registered Agent)
	PALM BEACH GRADENS, FL. 33410
5. I hereby accept the appointment as registered ogeni and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent:	
	G Selective Signature of Registered Agent
	Signature of Registered Agent
6,	7711 N. MILITARY TEXAL SUITE 212 (Mailing address of initial designated office)
	(Mailing address of initial designated office)
	PAIN BEACH GARDAUS, Fr. 33410
7. If limited partnersh	ip elects to be a limited liability limited partnership, check box

Page 1 of 2

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8. Name and business address of each gen	eral partner:
Name:	Business Address:
1 GERHARD H. SCHICKERINE	7711 N. M. M. WILLAY TR. #212
	PAIN BEACH GARDOUS, FI 33410
1. Smolake	7711 N. MUTTHEY TR. # 212
	PALOT BEACH GRADIUS FL. 32410
3 W. K. SCHICKEDANZ	7711. N. Muster Ta. #212
	PAIN BEACH GARDOUS, FL. 33410
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9. Effective date, if other than the date of (iting:	
(Effective date cannot be prior to nor more filed by the Florida Department of State.)	than 90 days after the date the document is
Signed this 26 TH day of	APRIL 2013 9 30
stated herein are true. I/We am/are aware the document to the Department of State const s.817.155; F.S.	omit this document and affirm that the facts hat any false information submitted in a itutes a third degree felony as provided for in
O G. Schuber	
(3) Ull Lewiched	
	200
Certified Copy (optional): \$52.5	
	e 2 of 2