## **Certificate of Limited Partnership**

A13000000517 FILED September 17, 2013 Sec. Of State tcline

Name of Limited Partnership:

RUBUJO FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Street Address of Limited Partnership:

3225 FRANKLIN AVE C 101 COCONUT GROVE, FL. 33133

Mailing Address of Limited Partnership:

3225 FRANKLIN AVE C 101 COCONUT GROVE, FL. 33133

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

SAMUEL RUBERT 3225 FRANKLIN AVENUE C 101 COCONUT GROVE, FL. 33133

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

Registered Agent Signature: SAMUEL RUBERT

The name and address of all general partners are:

Title: G SAMUEL RUBERT TRUSTEE 3225 FRANKLIN AVENUE C 101 COCONUT GROVE, FL. 33133 US

Title: G ATHALIA LUJO TRUSTEE 3225 FRANKLIN AVENUE C 101 COCONUT GROVE, FL. 33133

The effective date for this Limited Partnership shall be:

09/17/2013

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Seventeenth day of September, 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: SAMUEL RUBERT General Partner Signature: ATHALIA LUJO

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.