

Certificate of Limited Partnership

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FILED
September 23, 2013
Sec. Of State
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Name of Limited Partnership:

JOKADOZA LIMITED PARTNERSHIP

Street Address of Limited Partnership:

1501 W. CLEVELAND STREET
STE 200
TAMPA, FL. US 33606

Mailing Address of Limited Partnership:

1501 W. CLEVELAND STREET
STE 200
TAMPA, FL. US 33606

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

JONATHAN A LEVY
1501 W. CLEVELAND STREET
STE 200
TAMPA, FL. 33606

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

Registered Agent Signature: JONATHAN A LEVY

The name and address of all general partners are:

Title: G
JONATHAN A LEVY
1501 W. CLEVELAND STREET, STE 200
TAMPA, FL. 33606 US

Title: G
KAREN G LEVY
1501 W. CLEVELAND STREET, STE 200
TAMPA, FL. 33606 US

The effective date for this Limited Partnership shall be:

09/23/2013

Signed this Twenty Third 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: JONATHAN A LEVY

General Partner Signature: KAREN G. LEVY

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.