Florida Department of State Division of Corporations

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T. BROWN

3/27/2014

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CERTIFICATE OF LIMITED PARTNERSHIP QUANTUM CAPITAL PARTNERS FLF, LTD.

THE HOIL In accordance with Florida Statutes, Section 620.1201, this Certificate of Limite Partnership shall be filed with the Department of State of Florida, setting forth the following:

- Name. The name of this limited partnership shall be "Quantum Capital Partners FLF, Ltd."
- 2. Registered Agent and Address. The office and the name of the agent for service of process required to be maintained is as follows:

Stuart G. Lasher 1511 N. Westshore Boulevard, Suite 700 Tampa, Florida 33607

General Partner. The name and business address of the general partner is: 3.

> Quantum Capital Partners, Inc. 1511 N. Westshore Boulevard, Suite 700 Tampa, Florida 33607

The principal office and mailing address of the limited Mailing Address. partnership is:

> 1511 N. Westshore Boulevard, Suite 700 Tampa, Florida 33607

5. Limited Partnership. Quantum Capital Partners FLF, Ltd. is formed as a limited partnership under Chapter 620, of the Florida Revised Uniform Limited Partnership Act of 2005. day of March, 2014.

QUANTUM CAPITAL PARTNERS, INC.,

its General Pariner

Name: Stuart G. Lasher

Title: President

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF QUANTUM CAPITAL PARTNERS FLF, LTD.

Pursuant to the provisions of Section 620.1114 of the Florida Statutes, the undersigned limited partnership submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited partnership is: Quantum Capital Partners FLF, Ltd.
- 2. The name and address of the registered agent and office are:

Stuart G. Lasher 1511 N. Westahore Boulevard, Suite 700 Tampa, Florida 33607

Having been named as registered agent and to accept service of process for the above stated limited liability limited partnership at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 620, Florida Statutes.

Dated: March 26, 2014

Name: Stuart G. Lasher

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