## **Certificate of Limited Partnership**

A14000000495 FILED September 17, 2014 Sec. Of State tcline

Name of Limited Partnership: QAMAR FAMILY, LP

Street Address of Limited Partnership:

3275 N.W. 85TH TERRACE OCALA, FL. US 34482

Mailing Address of Limited Partnership:

3275 N.W. 85TH TERRACE OCALA, FL. US 34482

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

HUMERAA QAMAR 3275 N.W. 85TH TERRACE OCALA, FL. 34482

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

Registered Agent Signature: HUMERAA QAMAR

The name and address of all general partners are:

Title: G QAMAR FAMILY MANAGEMENT, LLC 3275 N.W. 85TH TERRACE OCALA, FL. 34482 US

Signed this Seventeenth day of September, 2014

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: HUMERAA QAMAR, MANAGER

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.