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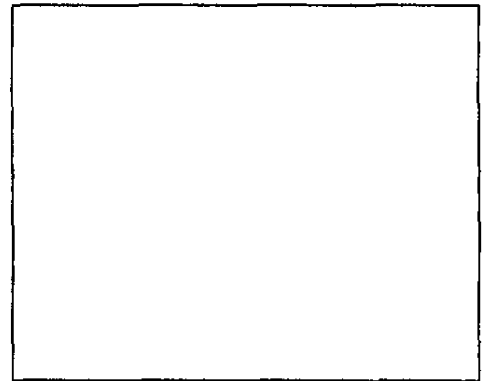
15 APR 13 AM 9:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 14 2015

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ENTITY NAME:

FAMILY AND LOVE PARTNERSHIP, LLLP

CK# 6873    FOR \$1216.25    (\$1061.25 for the filing)

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

\_\_\_ STAMPED COPY

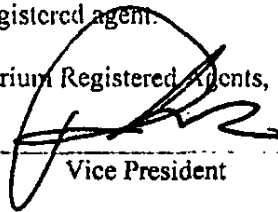
XXX CERTIFICATE OF STATUS

Examiner's Initials

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

1. FAMILY AND LOVE PARTNERSHIP, LLLP  
(Name of Limited Partnership or Limited Liability Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
2. 151 Crandon Blvd., #641, Key Biscayne, FL 33149  
(Street Address of initial designated office)
3. Atrium Registered Agents, Inc.  
(Name of Registered Agent for Service of Process)
4. 1500 San Remo Avenue, Suite 125, Coral Gables, Florida, 33146  
(Florida street address for Registered Agent)
5. 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 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.  

Atrium Registered Agents, Inc.

By:   
Vice President
6. 151 Crandon Blvd., #641, Key Biscayne, FL 33149  
(Mailing address of the initial designated office)
7. If the limited partnership elects to be a limited liability limited partnership check:  
☒ Yes      ☐ No
8. Name and business address of the general partner:  
  
Marcelo Sabino  
151 Crandon Blvd., #641  
Key Biscayne, FL 33149

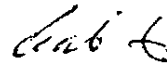
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Family and Love Partnership, LLLP  
Page 2

9. Effective date, if other than the date of filing:  
(Effective date cannot be prior to nor more than 90 days after the date the document is  
filed by the Florida Department of State.)

Signed this 9 day of April, 2015.

Signature of the general partner: I submit this document and affirm that the facts stated  
herein are true. I am aware that any 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.



MARCELLO SABINO, General Partner

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