

Certificate of Limited Partnership

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FILED
April 01, 2015
Sec. Of State
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Name of Limited Partnership:

FLORIDA INVESTORS LIMITED PARTNERSHIP

Street Address of Limited Partnership:

16646 CAPTIVA DRIVE
CAPTIVA, FL. 33924

Mailing Address of Limited Partnership:

POST OFFICE BOX 398
CAPTIVA, FL. 33924

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

E BARRY MANSUR
16646 CAPTIVA DRIVE
CAPTIVA, FL. 33924

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

Registered Agent Signature: E BARRY MANSUR

The name and address of all general partners are:

Title: G
E BARRY MANSUR
16646 CAPTIVA DRIVE
CAPTIVA, FL. 33924 UN

Signed this First day of April, 2015

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: E BARRY MANSUR

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.