

Certificate of Limited Partnership

A15000000292
FILED
May 08, 2015
Sec. Of State
nculligan

Name of Limited Partnership:

COLLEGETOWN GROUP III, LP AT FLORIDA STATE UNIVERSITY

Street Address of Limited Partnership:

2149 NORTH COMMERCE PKWY
WESTON, FL. 33326

Mailing Address of Limited Partnership:

2149 NORTH COMMERCE PKWY
WESTON, FL. 33326

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

BURGESS BUSINESS MANAGEMENT, INC
2149 NORTH COMMERCE PKWY
WESTON, FL. 33326

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

Registered Agent Signature: FRED BURGESS

The name and address of all general partners are:

Title: G
BURGESS BUSINESS MANAGEMENT, INC.
2149 NORTH COMMERCE PKWY
WESTON, FL. 33326

Signed this Eighth day of May, 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: FRED BURGESS

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.