

Certificate of Limited Partnership

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FILED
May 21, 2015
Sec. Of State
nculligan

Name of Limited Partnership:

VILLELLA FAMILY, LP

Street Address of Limited Partnership:

303 S.E. 22ND AVENUE
OCALA, FL. US 34471

Mailing Address of Limited Partnership:

303 S.E. 22ND AVENUE
OCALA, FL. US 34471

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

THOMAS L VILLELLA
303 S.E. 22ND AVENUE
OCALA, FL. 34471

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

Registered Agent Signature: THOMAS L. VILLELLA

The name and address of all general partners are:

Title: G
VILLELLA FAMILY MANAGEMENT, LLC
303 S.E. 22ND AVENUE
OCALA, FL. 34471 US

Signed this Twenty First 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: THOMAS L. VILLELLA

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.