## **Certificate of Limited Partnership**

A15000000414 FILED June 29, 2015 Sec. Of State nculligan

Name of Limited Partnership: WELLNESS RESIDENCES LLLP

Street Address of Limited Partnership:

8895 N. MILITARY TRL. SUITE 101B PALM BEACH GARDENS, FL. US 33410

Mailing Address of Limited Partnership:

8895 N. MILITARY TRL. SUITE 101B PALM BEACH GARDENS, FL. US 33410

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

JAMES CAPLAN 5910 NORTH OCEAN BOULEVARD OCEAN RIDGE, FL. 33435

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

Registered Agent Signature: JAMES CAPLAN

The name and address of all general partners are:

Title: G WELLNESS RESORTS LLC 8895 N. MILITARY TRL. SUITE 101B PALM BEACH GARDENS, FL. 33410 US

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Twenty Ninth day of June, 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: NAIMISHA BAROT

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.