

Certificate of Limited Partnership

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FILED
September 24, 2015
Sec. Of State
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Name of Limited Partnership:

GUTTA FAMILY LIMITED PARTNERSHIP

Street Address of Limited Partnership:

490 SAWGRASS CORPORATE PARKWAY
310
SUNRISE, FL. 33325

Mailing Address of Limited Partnership:

490 SAWGRASS CORPORATE PARKWAY
310
SUNRISE, FL. 33325

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

FRANK GUTTA
490 SAWGRASS CORP PKWY
310
SUNRISE, FL. 33325

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

Registered Agent Signature: FRANK GUTTA

The name and address of all general partners are:

Title: G
FRANK GUTTA
490 SAWGRASS CORP PKWY # 310
SUNRISE, FL. 33325

The effective date for this Limited Partnership shall be:

09/24/2015

Signed this Twenty Fourth day of September, 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: FRANK GUTTA

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.