

Certificate of Limited Partnership

A16000000568
FILED
October 11, 2016
Sec. Of State
ncausseaux

Name of Limited Partnership:

GEORG DUNCKER INSURANCE BROKERS NORTH AMERICA LP

Street Address of Limited Partnership:

100 N. BISCAYNE BOULEVARD
SUITE 2100
MIAMI, FL. US 33132

Mailing Address of Limited Partnership:

100 N. BISCAYNE BOULEVARD
SUITE 2100
MIAMI, FL. US 33132

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

REGISTERZENTRALE LLC
100 N. BISCAYNE BOULEVARD
SUITE 2100
MIAMI, FL. 33132

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

Registered Agent Signature: THOMAS BAUR

The name and address of all general partners are:

Title: G
GD INSURANCE BROKER MANAGEMENT CORPORATION
100 N. BISCAYNE BOULEVARD, SUITE 2100
MIAMI, FL. 33132 US

Signed this Eleventh day of October, 2016

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 BAUR

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.