Certificate of Limited Partnership

A16000000617 FILED November 07, 2016 Sec. Of State ncausseaux

Name of Limited Partnership:

WADDELL FAMILY LIMITED PARTNERSHIP, LLLP

Street Address of Limited Partnership:

825 HORSESHOE FALLS DRIVE ORLANDO, FL. 32828

Mailing Address of Limited Partnership:

825 HORSESHOE FALLS DRIVE ORLANDO, FL. US 32828

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

DONNA WADDELL 825 HORSESHOE FALLS DRIVE ORLANDO, FL. 32828

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

Registered Agent Signature: DONNA WADDELL

The name and address of all general partners are:

Title: G DONNA WADDELL 825 HORSESHOE FALLS DRIVE ORLANDO, FL. 32828 US

Title: G RICKY WADDELL 825 HORSESHOE FALLS DRIVE ORLANDO, FL. 32828 US

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Seventh day of November, 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: DONNA WADDELL General Partner Signature: RICKY WADDELL

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.