Certificate of Limited Partnership

A17000000543
FILED
November 13, 2017
Sec. Of State
ncausseaux

Name of Limited Partnership:

SQUARE POINT SOLUTIONS, LLLP

Street Address of Limited Partnership:

2525 PONCE DE LEON
SUITE 300
CORAL GABLES, FL. US 33134

Mailing Address of Limited Partnership:

2525 PONCE DE LEON
SUITE 300
CORAL GABLES, FL. US 33134

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

ANN WALTERS
2525 PONCE DE LEON
SUITE 300
CORAL GABLES, FL. 33134

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

Registered Agent Signature: ANN WALTERS

The name and address of all general partners are:

Title: G
ANN WALTERS
2525 PONCE DE LEON SUITE 300
CORAL GABLES, FL. 33134 US

Title: G
PETER WALTERS
2525 PONCE DE LEON SUITE 300
CORAL GABLES, FL. 33134 US

The effective date for this Limited Partnership shall be:

11/13/2017

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Thirteenth day of November, 2017

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: ANN WALTERS

General Partner Signature: PETER WALTERS

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.