## **Certificate of Limited Partnership**

A18000000127 FILED March 27, 2018 Sec. Of State

Name of Limited Partnership: GOLDEN PINE LLLP

Street Address of Limited Partnership:

PO 266318 WESTON, FL. 33326

Mailing Address of Limited Partnership:

PO 266318 WESTON, FL. 33326

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

SHARED FOCUS LLC 926 NANDINA DRIVE WESTON, FL. 33327

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

Registered Agent Signature: ALEJANDRO BALLESTIN

The name and address of all general partners are:

Title: G SHARED FOCUS LLC PO 266318 WESTON, FL. 33326

The effective date for this Limited Partnership shall be:

04/01/2018

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Twenty Seventh day of March, 2018

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: ALEJANDRO BALLESTIN

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.