

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000148340 3)))



H180001483403ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

From:

Account Name : CAPITAL SERVICES, INC.
Account Number : 120160000017
Phone : (800) 385-4647
Fax Number : (800) 492-3622

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

✓ SALLY **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

MAY 14 2018

Email Address: _____

FLORIDA/FOREIGN LP/LLLP
MINOR STREET LP #1

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

***PLEASE FILE SECOND,
AFTER IKDOK, INC.***

Electronic Filing Menu

Corporate Filing Menu

Help

CERTIFICATE OF LIMITED PARTNERSHIP
OF
MINOR STREET LP #1

FILED
18 MAY 11 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited partnership pursuant to the Florida Business Organizations Code, Chapter 620, Section 620.1201, does hereby certify as follows:

1. Name. The name of the limited partnership formed hereby (the "Partnership") is Minor Street LP #1.
2. Street Address of Initial Designated Office. The street address of the Partnership's initial designated office is 3800 NE 1st Avenue, 6th Floor, Miami, FL 33137 Attention Moss Kadey.
3. Mailing Address of Initial Designated Office. The mailing address of the initial designated office of the Corporation is the same as the street address of the initial designated office.
4. Registered Office and Registered Agent. The name of the Partnership's initial registered agent in the State of Florida is Capitol Corporate Services, Inc. The address of the Partnership's initial registered agent in the State of Florida is 515 E Park Ave 2ND FL, Tallahassee, FL 32301.
5. General Partner. The name and mailing address of the sole general partner of the Partnership is as follows:
IKDOK, Inc..
1722 Routh Street, Suite 1500 (JAR)
Dallas, Texas 75201
6. Indemnification/limitation on liability. To the fullest extent permitted by applicable law, no partner, manager or officer of the Partnership shall be personally liable to the Partnership or its partners for monetary damages for an act or omission in such capacity. Future amendments of applicable law may enlarge, but shall not diminish, the limitation on the personal liability of a partner, manager or officer. Similarly, any repeal or amendment of this paragraph 6, or the adoption of any other provision of this Certificate of Limited Partnership inconsistent with this paragraph 6, by the partners of the Partnership, shall be prospective only and shall not adversely affect any limitation on the personal liability existing at the time of such repeal, amendment or adoption of an inconsistent provision.

IN WITNESS WHEREOF, the undersigned, being the authorized representative of the entity named as registered agent to accept service of process for the Partnership at the place designated in this Certificate, hereby affirms that I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

REGISTERED AGENT:

Capitol Corporate Services, Inc.

By: Kim Tadlock
Name: Kim Tadlock
Title: Asst. Sec. on behalf of Capitol Corporate Services, Inc.

IN WITNESS WHEREOF, the undersigned, being the authorized representative of the sole general partner, has executed this Certificate of Limited Partnership of Minor Street LP #1 as of April 30, 2018, and hereby submits this Certificate and affirms the facts stated herein are true. The undersigned is aware that any 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.

GENERAL PARTNER:

IKDOK, Inc.

By: [Signature]
Name: Moss Kadey
Title: President

FILED
18 MAY 11 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA