

Certificate of Limited Partnership

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FILED
May 14, 2018
Sec. Of State
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Name of Limited Partnership:

10229 THURSTON GROVES, LP

Street Address of Limited Partnership:

10229 THURSTON GROVES BOULEVARD
SEMINOLE, FL. 33778

Mailing Address of Limited Partnership:

10229 THURSTON GROVES BOULEVARD
SEMINOLE, FL. 33778

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

PHILIP RITCHIE
10229 THURSTON GROVES BOULEVARD
SEMINOLE, FL. 33778

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

Registered Agent Signature: PHILIP W. RITCHIE

The name and address of all general partners are:

Title: G
10229 THURSTON GROVES, INC.
10229 THURSTON GROVES BOULEVARD
SEMINOLE, FL. 33778

Signed this Fourteenth day of May, 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: PHILIP RITCHIE

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.