# ABOOCCEST

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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SJOUWERMAN EN	NTERPRISES					
LIMITED PARTNE	RSHIP					
				Art of Inc. File		
				LTD Partnership File		
				Foreign Corp. File	-	
			₹_	L.C. File		
			<u></u>	Fictitious Name File		
				Trade/Service Mark	_	
				Merger File		
				Art, of Amend, File	_	
				RA Resignation		
				Dissolution / Withdrawal		
				Annual Report / Reinstatement	<del></del>	_
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Signature				Vehicle Search		
				Driving Record		
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	06/26/18			UCC 11 Search		
Name	Date	Time		UCC 11 Retrieval		
Walk-In	Will Pick Up _			Courier		

## CERTIFICATE OF LIMITED PARTNERSHIP OF SJOUWERMAN ENTERPRISES LIMITED PARTNERSHIP

The undersigned, desire to form a limited partnership under the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statute §620.1201 et. al., make the following certificate:

- 1. The name of the limited partnership shall be: SJOUWERMAN ENTERPRISES LIMITED PARTNERSHIP.
- 2. The Limited Partnership is created and formed for the purpose of engaging in all lawful business.
- 3. The street mailing address, location of the office and principal place of business for the limited partnership shall be 600 PINELAND AVENUE, BELLEAIR, FLORIDA 33756.
- 4. The name and business address of the general partner is SJOUWERMAN MANAGEMENT, LLC, whose business address is 600 PINELAND AVENUE, BELLEAIR, FLORIDA 33756.
  - 5. The partnership shall be perpetual.
- 6. The registered agent and its address for service of process as required by Florida Statute §620.1114 for the limited partnership shall be:

#### O'CONNOR LAW FIRM 2240 BELLEAIR ROAD, SUITE 115 CLEARWATER, FL 33764

The undersigned shall serve as a Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 25<sup>TH</sup> day of JUNE, 2018.
WITNESSES:

Clinical Apple (Comments)

General Partner

SJOUWERMAN MANAGEMENT, LLC, a Florida limited liability company as general partner

By:

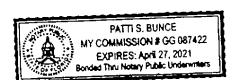
REBECCA WEISS SJOUWERMAN A/K/A REBECCA RANDI WEISS SJOUWERMAN, its Manager

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STATE OF FLORIDA COUNTY OF PINELLAS

) S.S.

The foregoing instrument was acknowledged before me this 25<sup>TH</sup> day of JUNE, 2018, by REBECCA WEISS SJOUWERMAN A/K/A REBECCA RANDI WEISS SJOUWERMAN as Manager of SJOUWERMAN MANAGEMENT, LLC, as general partner, on behalf of the SJOUWERMAN ENTERPRISES LIMITED PARTNERSHIP, a Florida Limited Partnership. He is personally known to me or has produced Florida Limited Partnership as identification and did take an oath.



Notary Public State of Florida

My Commission Expires:

### Acknowledgment of Registered Agent

I hereby am familiar with and accept the duties and responsibilities as Registered Agent pursuant to Florida Statute §620.1114 for said limited partnership.

O'CONNOR LAW FIRM Registered Agent

By:

Adam T. Rauman, Esquire, for the firm