## **Certificate of Limited Partnership**

A18000000393 FILED September 18, 2018 Sec. Of State ncausseaux

Name of Limited Partnership:
PP PEDIATRIC MANAGEMENT LP

Street Address of Limited Partnership:

90 CAFFERTY ROAD POINT PLEASANT, PA. 18950

Mailing Address of Limited Partnership:

500 SENECA STREET BUFFALO, NY. 14204

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

SHELLEY WITT 221 NE 20TH TERRACE CAPE CORAL, FL. 33909

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

Registered Agent Signature: SHELLEY WITT

The name and address of all general partners are:

Title: G JEFFREY RUBIN 975 KINGSTOWN RD WAKEFIELD, RI. 02879

Title: G WARREN COLE 145 E 76TH ST NEW YORK, NY. 07876

The effective date for this Limited Partnership shall be:

09/18/2018

Signed this Eighteenth day of September, 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: JEFFREY RUBIN General Partner Signature: WARREN COLE

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.