

3/15/2019

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

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19 MAR 18 AM 2:56
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FLORIDA/FOREIGN LP/LLLP
Sun Investment Partners, LP

Certificate of Status	0
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Estimated Charge	\$1,052.50

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K. SALY
MAR 19 2019

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

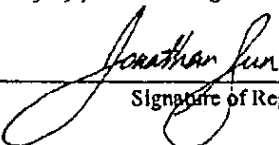
1. Sun Investment Partners, LP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLP.

2. 10137 Matraw Place
(Street address of initial designated office)
Golden Oak, Florida 32836

3. Jonathan Sun
(Name of Registered Agent for Service of Process)

4. 10137 Matraw Place
(Florida street address for Registered Agent)
Golden Oak, Florida 32836

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 10137 Matraw Place
(Mailing address of initial designated office)
Golden Oak, Florida 32836

7. If limited partnership elects to be a limited liability limited partnership, check box ☐.

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 TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:Business Address:

Archimedes Management, Inc.

10137 Matraw Place

Golden Oak, Florida 32836

First Light Partners, Inc.

10137 Matraw Place

Golden Oak, Florida 32836

9. Effective date, if other than the date of filing: _____
 (Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 18th day of February, 2019

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are 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.

First Light, Inc.

BY: 

Zhong-Ping Sun, President

Archimedes, Inc.

BY: 

Jonathan Sun, President

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75