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

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rinership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability I Jixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	Acceptable Limited Limited Partnership
ices: Limited Libbarry Cimited I di dierandy, C.S. C. 1. Or EDDI	20. TAL TAL
c/o TownePlace Suites 2450 Quantum Blvd	SELPATARY
(Street address of Initial designated office)	AS AS
Boynton Beach, FL 33426	3SS ASS
Joshua Gerstin, Esq.	PH 4:14 OF STAIR OF LORID
(Name of Registered Agent for Service of Process)	RIDA RIDA
40 SE 5th St., Suite 610	7 A
(Florida street address for Registered Agent)	
Boca Raton, FL 33432	
Duca Rator. Co 33434	
I hereby accept the appointment as registered agent and agree to act in this capacity. th the provisions of all statutes relative to the proper and complete performance of my th and accept the obligations of my position as registered agent	I further agree to a duties, and I am fan
I hereby accept the appointment as registered agent and agree to act in this capacity, th the provisions of all statutes relative to the proper and complete performance of my	I further agree to a duties, and I am fan
I hereby accept the appointment as registered agent and agree to act in this capacity. It the provisions of all statutes relative to the proper and complete perfurniance of my th and accept the obligations of my position as registered agent // 0 / 20 Signeture of Registered Agent	I further agree to a duties, and I am fan
I hereby accept the appointment as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete perfurniance of my th and accept the obligations of my position as registered agent	I further agree to a duties, and I am fan

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

Page 1 of 2

Name and business address of each gene Name;	ral partner: <u>Business Address:</u>
PLL Hospitality, Inc.	c/o TownePlace Suites 2450 Quantum Blvd
	Boynton Beach, PL 33426
	
	SLUMASSEE FLORIDA
	ASKY C
	PH L
	ATE RIDA
the Flortda Department of State.) Note: If the date inserted in this block does	han 90 days after the date the document is filed by not meet the applicable statutory filing requirements, effective date on the Department of State's records.
Signed this <u>\3</u> day of	JANUARY 2020
Signature of each general partner: I/We submerein are true. I/We am/are aware that any Department of State constitutes a third degree	nit this document and affirm that the facts stated false information submitted in a document to the
ROWRT GLARINI	
Pros. of FLL HOSPI	TALITYINC, G.P.
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	.00 (\$965 Filing Fee and \$35 Registered Agent Fee)