

Certificate of Limited Partnership

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FILED
March 02, 2020
Sec. Of State
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Name of Limited Partnership:

TRIFECTA ULTRA FUND, LP

Street Address of Limited Partnership:

12901 MCGREGOR BLVD, SUITE 20-221
SUITE 20-221
FT MYERS, FL. 33919

Mailing Address of Limited Partnership:

12901 MCGREGOR BLVD, SUITE 20-221
SUITE 20-221
FT MYERS, FL. 33919

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

CHRISTINA LAEL
12901 MCGREGOR BLVD
SUITE 20-221
FT MYERS, FL. 33919

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

Registered Agent Signature: CHRISTINA LAEL

The name and address of all general partners are:

Title: G
CHRISTINA LAEL
12901 MCGREGOR BLVD, SUITE 20-221
FT MYERS, FL. 33919 UN

Title: G
JOHN LAEL
12901 MCGREGOR BLVD, SUITE 20-221
FT MYERS, FL. 33919

Signed this Second day of March, 2020

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: CHRISTINA LAEL

General Partner Signature: JOHN LAEL

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.