

A200000000112

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H200000872173)))



H200000872173ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : HILL WARD HENDERSON  
Account Number : 072100000520  
Phone : (813)221-3900  
Fax Number : (813)200-5995

FILED  
2020 MAR 19 PM 4:55  
TALLAHASSEE, FLORIDA  
CLERK OF STATE

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

Email Address: \_\_\_\_\_

RECEIVED

2020 MAR 19 AM 9:31

FLORIDA/FOREIGN LP/LLLP  
TMMC Holdings, LP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

Electronic Filing Menu

Corporate Filing Menu

Help

45 ✓

((H20000087217 3)))

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

1. TMMC Holdings, 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 L.L.L.P.

2. 2909 W. Bay to Bay Blvd., Suite 300

(Street address of initial designated office)

Tampa, FL 33629

3. Lawrence Repar

(Name of Registered Agent for Service of Process)

4. 2909 W. Bay to Bay Blvd., Suite 300

(Florida street address for Registered Agent)

Tampa, FL 33629

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. 2909 W. Bay to Bay Blvd., Suite 300

(Mailing address of initial designated office)

Tampa, FL 33629

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

((H20000087217 3)))

8. Name and business address of each general partner:

Name:

Business Address:

White Owl America LLC

2909 W. Bay to Bay Blvd., Suite 300

Tampa, FL 33629

FILED  
2020 MAR 19 PM 4:55  
ALLIANCE STATE  
FLORIDA

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 18<sup>th</sup> day of March, 2020

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.

Lawrence Zepar, CEO of White Owl America LLC

**Filing Fees:**

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

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**

Page 2 of 2

((H20000087217 3)))