

# Certificate of Limited Partnership

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FILED  
March 26, 2020  
Sec. Of State  
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Name of Limited Partnership:

GRAVES FAMILY LIMITED PARTNERSHIP

Street Address of Limited Partnership:

69 WEST SAINT LUCIA LANE  
SANTA ROSA BEACH, FL. US 32459

Mailing Address of Limited Partnership:

69 WEST SAINT LUCIA LANE  
SANTA ROSA BEACH, FL. US 32459

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

WILLIAM W GRAVES  
69 WEST SAINT LUCIA LANE  
SANTA ROSA BEACH, FL. 32459

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

Registered Agent Signature: WILLIAM W. GRAVES

The name and address of all general partners are:

Title: G  
JAMALYN H GRAVES  
69 WEST SAINT LUCIA LANE  
SANTA ROSA BEACH, FL. 32459 US

The effective date for this Limited Partnership shall be:

03/26/2020

Signed this Twenty Sixth 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: JAMALYN H. GRAVES

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.