

Certificate of Limited Partnership

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FILED
June 01, 2020
Sec. Of State
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Name of Limited Partnership:

MAYPORT VENTURE PARTNERS, III, LLLP

Street Address of Limited Partnership:

50 N. LAURA STREET
1700
JACKSONVILLE, FL. US 32202

Mailing Address of Limited Partnership:

50 N. LAURA STREET
1700
JACKSONVILLE, FL. US 32202

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

C. DANIEL RICE
50 N. LAURA STREET
1700
JACKSONVILLE, FL. 32202

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

Registered Agent Signature: C. DANIEL RICE

The name and address of all general partners are:

Title: G
MAYPORT VENTURE PARTNERS, LLC
50 N. LAURA STREET #1700
JACKSONVILLE, FL. 32202 US

The effective date for this Limited Partnership shall be:

06/01/2020

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this First day of June, 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: C. DANIEL RICE, MANAGER

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.