

## Florata Department of State Division of corporates Electronic Floring Cover Sheat. Note: reast print this page and use mas a cover sheat Typome far audit must be (shown below) on the top and bottom of all pages of the accument.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HTG UNITED, LLC
Account Number : 120190000094
Phone : (305)860-8188
Fax Number : (305)639-8427

Fax Number : (305)639-8427

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

Email Address: glendab@htgf.com

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## FLORIDA/FOREIGN LP/LLLP HTG Harbor, Ltd.

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Electronic Filing Menu

Corporate Filing Menu

Help

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

ne of Limited Partnership or Limited Liability Limited Partnership, which must include sufficenceship suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability	Limited Partnership
xes: Limited Liability Limited Partnership, L.L.P. or LLLP.	
construction of the Cale Class	
3225 Aviation Avenue, 6th Floor (Street address of initial designated office)	
·	
Coconut Grove, FL 33133	
Marrhau Diager P A	ag nei an et
Matthew Rieger P.A.  (Name of Registered Agent for Service of Process)	, ,
3225 Aviation Avenue, 6th Floor	
(Florida street address for Registered Agent)	•- કેંદ્ર
	- · · ·
Coconut Grove, FL 33133	***
and garre to got in this capac	by. I further agree to
I hereby accept the appointment as registered agent and agree to act in this capac th the provisions of all statutes relative to the proper and complete performance of t	ty. I further agree to ny duties, and I am fo
and garre to got in this capac	ty. I further agree to
I hereby accept the appointment as registered agent and agree to act in this capac th the provisions of all statutes relative to the proper and complete performance of t	ty. I further agree to ny duties, and I am fo
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I hereby accept the appointment as registered agent and agree to act in this capacith the provisions of all statutes relative to the proper and complete performance of the and accept the obligations of my position as registered agent.  Signature of Registered Agent  3225 Aviation Avenue, 6th Floor	ty. I further agree to
I hereby accept the appointment as registered agent and agree to act in this capac the theoretical performance of the provisions of all statutes relative to the proper and complete performance of the and accept the obligations of my position as registered agent.	ty. I further agree to

Page 1 of 2

HTG Harbor, LLC	3225 Aviation Avenue, 6th Floor	3225 Aviation Avenue, 6th Floor	
L 16000201382	Coconut Grove, FL 33133		
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		<del></del>	
the Florida Department of State.) Note: If the date inserted in this bl	date of filing:  or more than 90 days after the date the document is  ock does not meet the applicable statutory filing requirement's effective date on the Department of State	uireme	
Signed this <u>lst Day</u>	day of October, 2020	_	
herein are true. I/We am/are aware	I/We submit this document and affirm that the facts that any false information submitted in a document hird degree felony as provided for in s.817.155, F.S	to the	
<u> </u>	,		

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