## **Certificate of Limited Partnership**

A20000000513 FILED October 30, 2020 Sec. Of State

Name of Limited Partnership: SALERNO FAMILY LIMITED PARTNERSHIP

Street Address of Limited Partnership:

7159 PRESTWICK CIRCLE UNIVERSITY PARK, FL. 34201

Mailing Address of Limited Partnership:

7159 PRESTWICK CIRCLE UNIVERSITY PARK, FL. 34201

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

NICHOLAS R SALERNO 7159 PRESTWICK CIRCLE UNIVERSITY PARK, FL. 34201

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

Registered Agent Signature: NICHOLAS R. SALERNO

The name and address of all general partners are:

Title: G NICHOLAS R SALERNO 7159 PRESTWICK CIRCLE UNIVERSITY PARK, FL. 34201

The effective date for this Limited Partnership shall be:

10/30/2020

Signed this Thirtieth day of October, 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: NICHOLAS R. SALERNO

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.