

**A20 00000055**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 517-6582

From:

Account Name : HOLLAND & KNIGHT  
Account Number : 072100000016  
Phone : (813) 227-8500  
Fax Number : (813) 901-4200

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

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FLORIDA/FOREIGN LP/LLP  
TEAM LP

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Estimated Charge	\$1,008.75

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Corporate Filing Menu

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2020 NOV 17 AM 11:02

20 NOV 17 AM 7:29

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

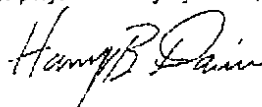
1. TEAAM LP  
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or L.L.P.

2. 2119 Harden Blvd, Lakeland, FL 33803  
(Street address of initial designated office)

3. Corporation Service Company  
(Name of Registered Agent for Service of Process)

4. 1201 Hays Street, Tallahassee, Florida 32301  
(Florida street address for Registered Agent)

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. 2119 Harden Blvd, Lakeland, FL 33803  
(Mailing address of initial designated office)

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

## 8. Name and business address of each general partner:

Name:Business Address:

WEEWAT, Inc

2119 Harden Blvd, Lakeland, FL 33803

## 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 30<sup>th</sup> day of October, 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.

## Filing Fees:

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

## Certified Copy (optional):

\$52.50

## Certificate of Status (optional):

\$8.75