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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BARNETT, KIRKWOOD, KOCH, LONG & FOSTER, P.A.
Account Number : 072731001155
Phone : (813)253-2020
Fax Number : (813)251-6711

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

Email Address: tseemann@barnettbolt.com

FLORIDA/FOREIGN LP/LLP**KMDG Capital Investments Partnership, Ltd.**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$1,008.75

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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

1. KMDG Capital Investments Partnership, Ltd.
(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 LLLP.

2. 510 Vonderburg Drive, Suite 208
(Street address of initial designated office)
Brandon, FL 33511

3. David L. Koche
(Name of Registered Agent for Service of Process)

4. 601 Bayshore Blvd., Suite 700
(Florida street address for Registered Agent)
Tampa, FL 33606

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 David L. Koche

6. P.O. Box 2677
(Mailing address of initial designated office)
Brandon, FL 33509

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

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8. Name and business address of each general partner:

Name:Business Address:Henderson Family Office, Inc.510 Vonderburg Drive, Suite 208Brandon, FL 33511

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 3RD day of November 2021

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.
 HENDERSON FAMILY OFFICE, INC., as General Partner

By: _____

David L. Roche, Authorized Signer

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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