Certificate of Limited Partnership

A22000000220 FILED March 29, 2022 Sec. Of State sprather

Name of Limited Partnership:

THE TRAVELING THERAPIST SPA & EMOTIONAL WELLNESS CLINIC LLLP

Street Address of Limited Partnership:

3441 COLONIAL BLVD 2&3 FT. MYERS, FL. 33966

Mailing Address of Limited Partnership:

303 NE 3RD AVE 8 CAPE CORAL, FL. 33909

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

THE TRAVELING THERAPIST LLC 303 NE 3RD AVE 8 CAPE CORAL, FL. 33909

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

Registered Agent Signature: YALILY SMITH

The name and address of all general partners are:

Title: G
PATRICIA SULLIVAN MRS.
12150 SHOREVIEW DR
MATLACHA, FL. 33993

The effective date for this Limited Partnership shall be:

03/29/2022

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Twenty Ninth day of March, 2022

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: PATRICIA SULLIVAN

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.