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		Account Name : SHUTTS & BOWEN LLP (ORLANDO)	. >		
σ		Account Number : I20030000004	3	32	
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## FLORIDA/FOREIGN LP/LLLP UST Riverport Investment, LP

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## CERTIFICATE OF LIMITED PARTNERSHIP

	UST I	RIVERPORT	INVESTM	IENT, LP			_	
	(Name of Limited Partnership;	must contain a s	uffix such as	"Limited", "Ltd.", or "Lim	ited Partne	ership")	1	
	4705 South Apople	ca-Vineland Ro	oad, Suite 20	1, Orlando, FL 32819			_	
	(Street address of initial designated office)							
	Co	tio-Cor		-lando				
		rporation Cor					_	
	·	_						
		venue, Suite I ida street addres:		Orlando, Florida 328	01		_	
	(Fior	ida succi addics:	5 IOI REGISTER	od regenty				
	I hereby accept the appointment	as registered ag	ent and agre	e to act in this capacity. I f	urther agre	ee to		
	comply with the provisions of all and I am familiar with and accep	l statutes relative ot the obligation	e to the prope s of my positi	r and complete performant on as revistered avent.	ce of my di	ities,		
	•							
	CORPOR	LATION CO	APANY OI	FORLANDO				
	79h	in h	us					
	I Greach H	umphRie	<u> </u>	, Vice Pr	resident			
	(Registered Agent must sign here	e to accept desig	nation as Rep	pistered Agent for Service	of Process)	)		
	4705 South Apopks	a-Vineland Re	oad, Suite 2	201, Orlando, FL 3281	9			
	(Mai	ling address of it	nitial designa	ted office)				
	If limited partnership elects	s to be a limit	ed liability	limited partnership, ch	neck box			
	Name and business address of each general partner:  Name:  Business Address:							
	Name:			Business Address:		A		
				4705 C 41 4	II.	$\sim$		
	UST Riverport Manageme	nt Corp.		4705 South Apopka- Suite 201	viņeiano			
				Orlando, FL 32819	ñ.	<b>A</b>		
				,		<u>ب</u>		
	Effective date shall be the	date of filing.			; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	٤۽		
	Signed this 26 day of	May	, 2022					
	·							
na •-	ture of each general partner: ue. I/We am/are aware that an	I/we submit the	nis documei	it and affirm that the I	acis state he Denar	a nere tment i	u. of	
ic ic	constitutes a third degree felor	ny as provided	l for in s.81	7.155, F.S.	no Depar		٠.	
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		UST Rive	mort, Mana	gement Corp., its gene	eral partn	er		
		By:	ne +					
		Name: La	ince Fair		<del></del>			
		Title: Vic	e President					