



# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CABVITA LIMITED PARTNERSHIP

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: BA

10/18/22

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
CABVITA LIMITED PARTNERSHIP

The undersigned, desire to form a limited partnership under the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statute §620.1201 et. al., make the following certificate:

1. The name of the limited partnership shall be: CABVITA LIMITED PARTNERSHIP.
2. The Limited Partnership is created and formed for the purpose of engaging in all lawful business.
3. The street mailing address, location of the office and principal place of business for the limited partnership shall be 3814 GUNN HIGHWAY, SUITE A, TAMPA, FLORIDA 33618.
4. The name and business address of the general partner is CELEVITA LLC, whose business address is 3814 GUNN HIGHWAY, SUITE A, TAMPA, FLORIDA 33618.
5. The partnership shall be perpetual.
6. The registered agent and its address for service of process as required by Florida Statute §620.1114 for the limited partnership shall be:

O'CONNOR LAW FIRM  
2240 BELLEAIR ROAD, SUITE 115  
CLEARWATER, FL 33764

The undersigned shall serve as a Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

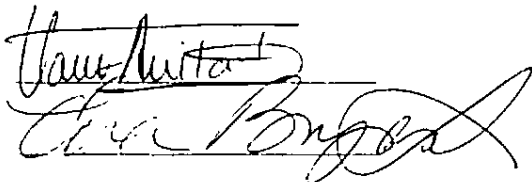
Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 14 day of OCTOBER, 2022.

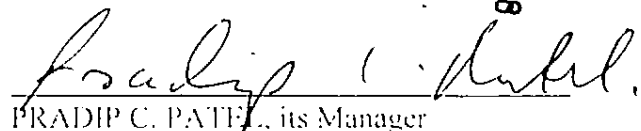
WITNESSES:

General Partner

CELEVITA LLC, a Florida  
limited liability company as general partner



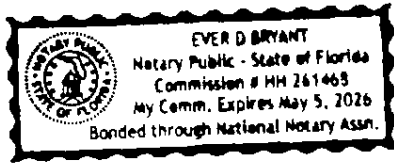
By:

  
PRADIP C. PATEL, its Manager

STATE OF FLORIDA  
TALLAHASSEE  
2022 OCT 18 AM 7:28  
APPROVED  
AND  
FILED

STATE OF FLORIDA,  
COUNTY OF Hillsborough ) S.S.

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this 14 day of October, 2022, by PRADIP C. PATEL, as Manager of CELEVITA LLC, as general partner, on behalf of the CABVITA LIMITED PARTNERSHIP, a Florida Limited Partnership. He is personally known to me or has produced \_\_\_\_\_ as identification and did take an oath.



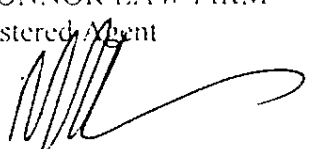
Ever D Bryant  
Notary Public  
State of Florida  
My Commission Expires:

Acknowledgment of Registered Agent

I hereby am familiar with and accept the duties and responsibilities as Registered Agent pursuant to Florida Statute §620.1114 for said limited partnership.

O'CONNOR LAW FIRM  
Registered Agent

By:

  
Patrick M. O'Connor, Esquire, for the firm