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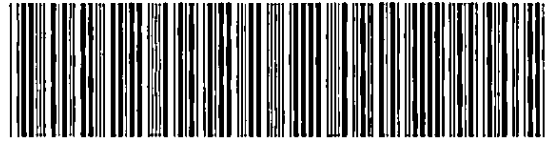
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DATE: 12/21/22

NAME: TRINITY VILLAGE, LTD

TYPE OF FILING: CERTIFICATE OF LIMITED PARTNERSHIP

COST: 1,000.00 - CHECK ATTACHED

RETURN: PLAIN COPY PLEASE

~~ACCOUNT: ECA000000015~~

~~AUTHORIZATION: ABBIE PAUL HODGE~~

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**CERTIFICATE OF LIMITED PARTNERSHIP
OF
TRINITY VILLAGE, L.P.**

Pursuant to the authority of Section 620.1201, Florida Statutes, the undersigned, constituting the general partner of TRINITY VILLAGE, LTD. (the "Partnership"), hereby submits the following in connection with the formation of the Partnership.

- 1 The name of the Partnership shall be **TRINITY VILLAGE, LTD**
- 2 The address of the initial office where records shall be kept shall be 3323 W. Commercial Blvd., Suite E220, Fort Lauderdale, Florida 33309. The name and address of the initial registered agent for service of process shall be Mitchell Rosenstein, 3323 W. Commercial Blvd., Suite E220, Fort Lauderdale, Florida 33309.

3. The name and initial business address of the General Partner is:

TRINITY VILLAGE GP, INC.
a not for profit corporation
2795 N 10th Street
Haines City, Florida 33844

4. The initial mailing address of the firm is Suite E220, Fort Lauderdale, Florida 33309.

5. The Partnership hereby elects not to be

This Certificate has been executed by the
2022.

GENERAL PARTNER:

Trinity Village GP, Inc., a Florida not-for-profit corporation

By Charles E. Anderson
Charles E. Anderson, Executive Director

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ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been designated as the Registered Agent for **TRINITY VILLAGE, LTD.**, the undersigned hereby accepts the designation and agrees to act as the Registered Agent of said limited partnership and states that it is familiar with and accepts its statutory obligations as such.



Mitchell Rosenstein

Dated this 21 day of December, 2022.

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CLERK OF STATE
MASSACHUSETTS