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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SHUTTS & BOWEN LLP (ORLANDO)

Account Number: I20030000004 : (407)835-6769 Phone : (407)843-4076 Fax Number

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

corpmail@shutts.com

Email Address:

FLORIDA/FOREIGN LP/LLLP Boyd Family Limited Partnership, LLLP

Certificate of Status	0
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CERTIFICATE OF LIMITED PARTNERSHIP FOR BOYD FAMILY LIMITED PARTNERSHIP, LLLP

ARTICLE I - NAME

The name of the entity, which is a limited liability limited partnership, is:

BOYD FAMILY LIMITED PARTNERSHIP, LLLP

ARTICLE II - ADDRESS

The mailing address and street address of the initial designated office of the entity is:

14422 Shoreside Way Suite 130 Winter Garden, FL 34787

ARTICLE III - REGISTERED AGENT

The name and address of the registered agent for service of process are:

Corporation Company of Orlando 300 South Orange Avenue Suite 1600 (JGW) Orlando, Florida 32801

REGISTERED AGENT ACCEPTANCE:

I hereby accept the appointment as registered agent and agree to act in this capacity. 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.

Date: June 7, 2023

101/0

(Registered Agent's Signature)
James G. Willard, President

ARTICLE IV - LIMITED LIABILITY LIMITED PARTNERSHIP

The entity elects to be a limited liability limited partnership.

ARTICLE V - GENERAL PARTNER

The name and business address of the sole general partner are:

Scott T. Boyd 14422 Shoreside Way Suite 130 Winter Garden, FL 34787

ARTICLE VI - PURPOSE

The entity has been organized for the purpose of engaging in any lawful act or activity for which limited liability limited partnerships may be formed under the Florida Revised Uniform Limited Partnership Act and to engage in any and all activities necessary or incidental thereto.

ARTICLE VII - EFFECTIVE DATE

The effective date of this Certificate of Limited Partnership shall be the date of filing with the Florida Department of State.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership this 7 day of June, 2023.

SOLE GENERAL PARTNER:

Scott T. Boyd

(This document is executed in accordance with Sections \$\display\$20.1204(1)(a) and 620.1204(2), Florida Statutes. I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Florida Department of State constitutes a third-degree felony as provided for in Section 817.155, Florida Statutes.)