Division of Corporations

## Florida Department of State Division of Corporations Electronic Fling Oper Sheet 349

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email	Address:	 	

## FLORIDA/FOREIGN LP/LLLP Best Kept Capital Flagship Fund LP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

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Electronic Filing Menu

Corporate Filing Menu

Help

## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd, Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP

	(Street address of initial designated office)	
Tampa FL 33603-1026		
Northwest Registered Age	nt LLC	
Northwest Registered Age	(Name of Registered Agent for Service of Process)	
Northwest Registered Age 7901 4th St N STE 300	<u> </u>	
· <u> </u>	<u> </u>	

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

Signature of Registered Agent

2120 W Clifton St	<b>ं</b> गुरु
(Mailing address of initial designated office)	
Tampa FL 33603-1026	
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If limited partnership elects to be a limited liability limited partnersh	

2023 JUL 25 PH 4: 16

To: 18506176383

From: Registered Agents Inc.

8. Name and business address of c Name:	ach general partner: <u>Business Address:</u>	
Stephen Farrington	2120 W Clifton St	
	Tampa FL 33603-1026	i
Best Kept Capital LLC	2120 W Clifton St	
	Tampa FL 33603-1026	3
	<del>_</del>	
9. Effective date, if other than the of (Effective date cannot be prior to not the Florida Department of State.)  Note: If the date inserted in this blot this date will not be listed as the do	or more than 90 days after the	ble statutory filing requirements
Signed this 25th	day of	2023
Signature of each general partner: I herein are true. I/We am/are aware Department of State constitutes a the	that any false information su	bmitted in a document to the
Styphen Freington	as Begt Kept	Capital U.C.
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee ar \$52.50 \$8.75	nd \$35 Registered Agent Fee)