

Certificate of Limited Partnership

A24000000104
FILED
February 29, 2024
Sec. Of State
msolomon

Name of Limited Partnership:

GUARANTEE REINSURANCE LTD.

Street Address of Limited Partnership:

9881 W SUBURBAN DR
PINECREST, FL. US 33156

Mailing Address of Limited Partnership:

9881 W SUBURBAN DR
PINECREST, FL. US 33156

The name and Florida street address of the registered agent is:

DAVID R WHITE
9881 W SUBURBAN DR
PINECREST, FL. 33156

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: DAVID WHITE

The name and address of all general partners are:

Title: G
DAVID R WHITE
9881 W SUBURBAN DR
PINECREST, FL. 33156 US

Title: G
ERIKA F WHITE
9881 W SUBURBAN DR
PINECREST, FL. 33156 US

The effective date for this Limited Partnership shall be:

02/29/2024

Signed this Twenty Ninth day of February, 2024

I (we) declare the I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

General Partner Signature: DAVID WHITE

General Partner Signature: ERIKA WHITE

The individual(s) signing this document affirm(s) that the facts stated herein are true and the individual(s) is/are aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

A24000000104

Guarantee Reinsurance Ltd.
9881 W Suburban Dr
Pinecrest, FL 33156

March 1, 2024

To whom it may concern,

I have erroneously completed two filings with the State of Florida to create a new entity. As such, can we please collapse the new LLC I formed named "Guarantee Reinsurance LLC" (document number L24000100349) into the newly requested partnership named:

Document Number: W24000034601
Entity Name: GUARANTEE REINSURANCE LTD.
Tracking Number: 700424955597
Pin Number: 5597

Thanks very much for your assistance in correcting this filing. I am hopefully that this will not materially delay the formation process.

Regards,



David White