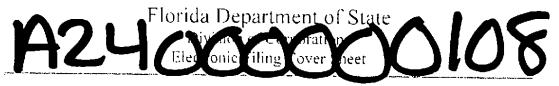
3/1/24, 9 39 AM

Division of Corporations



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.

(((II24000082449.3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : 120190000068

Phone : (407)326-8484 Fax Number : (407)604-6519

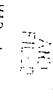
the the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: Contact@medeirossouza.com

Email Address: contact@medeirossouza.com

FLORIDA/FOREIGN LP/LLLP 10X INVESTMENTS USA LP

Certificate of Status	
Certified Copy	0
Page Count	01
Estimated Charge	\$1,008.75



COVER LETTER 11

TO:	Registration Section Division of Corporati	ons		
SUBJ	ECT: 10X investments U	SA LP		
			nership or Lim	ited Liability Limited Partnership
The e	nclosed Certificate of L	imited Partnersh	ip and fees a	re submitted for filing
Please	return all corresponde	nce concerning th	nis matter to	
Ruben	Souza			
	Contac	i Person		
MEDE	IROS SOUZA CORP			
	Firm/Co	ompany		_
1711 A	mazing Way Ste 213			
	bA.	dress		_
Ococe,	FL. 34761			
	City, State a	nd Zip Code		_
contact	@medeirossouza com			
Ę.	-mail address: (to be used fo	r future annual repo	rt notification)	
For fu	rther information conce	rning this matter	. please call;	
Rubem	Souza	a	407	,3268484
	Name of Contact Person	······································	Area Code i	3268484 and Daytime Telephone Number
Enclos	sed is a check for the fo	Howing amount:		
(\$90	55 Filing Fee and and C Registered Agent Statu	crtificate of	S1,052,50 Fi and Certified	ling Fees S1,061.25 Filing Fees, Certified Copy, and Certificate of Status
Regist Divisio Oliftor 2661 F	ET ADDRESS: ration Section on of Corporations of Building Executive Center Circle assee, FL 32301		Regist Divisi P. O. I	ING ADDRESS: ration Section on of Corporations 30x 6327 assee, FL 32314

CR2E030 (6/17)

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

10X investments USA LP		
Parmership suffixes. Limited i	or Lamited Liability Lamited Partnership, which must include suffix) Acceptable Limite Partnership Limited, L.P., I.P., or Lid. Acceptable Limited Liability Limited Partnership, L.L.L.P., or LLLP.	ap
2. 1711 Amazing Way Ste 2	13, Ococc, FL, 34761	
	(Street address of initial designated office)	
, MEDEIROS SOUZA CO	R P	
	(Name of Registered Agent for Service of Process)	_
1711 Amazing Way Ste 2		
	(Florida street address for Registered Agent)	_
rith the provisions of all sta	iniment as registered agent and agree to act in this capacity. I further agree tutes relative to the proper and complete performance of my duties, and I am ms of my position as registered agent.	— 10 com familia
	. 1 12	2
_	Signature of Registered Agent	174
1711 Amazing Way Ste 2	13, Ococe FL, 34761	ZUZ4 HAR
···	(Mailing address of initial designated office)	

7. If limited partnership elects to be a limited liability limited partnership, check box [].

ALY INVESTMENTS USA LLC	Business Address:	
	1711 Amazing Way Ste	213, Ococe FL, 34761
	71,,	
ABRAHAM INTERNATIONAL LLC	1711 Amazing Way Ste !	213, Ocuee FL, 34761
		
11.		
	 	-
		
9. Effective date, if other than the	date of filing:	-
(Effective date cannot be prior to t the Florida Department of State.)	nor more than 90 days after the i	late the document is filed b
	ock does not meet the applicable	· Statutory filino requireme
Note: If the date inserted in this bl	norment's effective date on the I	Department of State's recor
Note: If the date inserted in this blue has date will not be listed as the date.	comment is enterested diffic of the l	· parament of cities of recent
Note: If the date inserted in this bl his date will not be listed as the da	evalue of the transfer and the f	- spanned or online or recon
his date will not be listed as the de		
Signed this	day of	2024
his date will not be listed as the do Signed this Lst Signature of each general partner:	day of March I/We submit this document and	2024 offirm that the facts stated
his date will not be listed as the de Signed this Lst Signature of each general partner; nerein are true. I/We am/are aware	day of March I/We submit this document and a that any false information subm	2024 offirm that the facts stated offed in a document to the
Signed this Lst Signature of each general partner; nerein are true. I/We am/are aware Department of State constitutes a t	day of March I/We submit this document and a that any talse information submit degree felony as provided for	2024 offirm that the facts stated officed in a document to the
Note: If the date inserted in this block this date will not be listed as the description of the Signature of each general partner; herein are true. I/We am/are aware Department of State constitutes a to the two the Selection to the selection of Selecti	day of March I/We submit this document and a that any talse information submit degree felony as provided for	2024 offirm that the facts stated offed in a document to the
Signed this Lst Signature of each general partner; nerein are true. I/We am/are aware Department of State constitutes a to the two to the Solder Tayounged.	day of March I/We submit this document and a that any false information submit degree felony as provided for	affirm that the facts stated officed in a document to the or in 8 817,155, F.S.
Signed this Lst Signature of each general partner; nerein are true. I/We am/are aware Department of State constitutes a t	day of March I/We submit this document and a that any false information submit degree felony as provided for	2024 aftirm that the facts stated