

Certificate of Limited Partnership

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FILED
May 15, 2024
Sec. Of State
msolomon

Name of Limited Partnership:

THE SAID I. HAKKI FAMILY LIMITED LIABILITY LIMITED
PARTNERSHIP II

Street Address of Limited Partnership:

1003 S. ALEXANDER STREET
SUITE 7
PLANT CITY, FL. 33563

Mailing Address of Limited Partnership:

1003 S. ALEXANDER STREET
SUITE 7
PLANT CITY, FL. 33563

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

SPERRY LAW FIRM
1607 S. ALEXANDER STREET
SUITE 101
PLANT CITY, FL. 33563

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

Registered Agent Signature: BRUCE J. SPERRY

The name and address of all general partners are:

Title: G
SAID I HAKKI
P.O. BOX 137
HAYMARKET, VA. 20169

The effective date for this Limited Partnership shall be:

05/15/2024

This Limited Partnership is a Limited Liability Limited Partnership.

Signed this Fifteenth day of May, 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: SAID I. HAKKI

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.