## **Certificate of Limited Partnership**

A16000000468 FILED September 13, 2016 Sec. Of State ncausseaux

Name of Limited Partnership: TRINITY VILLAGE FLORIDA LP

Street Address of Limited Partnership:

14502 N. DALE MABRY HIGHWAY 333 TAMPA, F. 33618

Mailing Address of Limited Partnership:

14502 N. DALE MABRY HIGHWAY 333 TAMPA, F. 33618

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

DAVID GOLDSTEIN 14502 N. DALE MABRY HIGHWAY 333 TAMP, FL. 33618

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

Registered Agent Signature: DAVID GOLDSTEIN

The name and address of all general partners are:

Title: G TRINITY VILLAGE FLORIDA GP LLC 14502 N. DALE MABRY HIGHWAY, SUITE 333 TAMPA, FL. 33618

Signed this Thirteenth day of September, 2016

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: RICHMOND C. FLOWERS

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.