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Account Name : DEAN, MEAD, SCERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A Account Number : 076077001702 Phone : (407)841-1200 Pax Number : (407)423-1831

FLORIDA LIMITED PARTNERSHIP

Maguire Road Property, Ltd.

Certificate of Status	0
Certified Copy	0
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Our Reference No. 18941/33473

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CERTIFICATE OF LIMITED PARTNERSHIP OF MAGUIRE ROAD PROPERTY, LTD.

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.205 of the Florida Statutes, hereby states the following:

- 1. The name of the partnership is Maguire Road Property, Ltd. (the "Partnership")
- 2. The address of the office of the Partnership as referred to in Section 620.108 of the Florida Statutes is 6355 Metrowest Boulevard, Suite 330, Orlando, Florida 32835.
- 3. The name of the agent for service of process on the Partnership shall be Nancy A. Rossman, 6355 Metrowest Boulevard, Suite 330, Orlando, Florida 32835.
 - The name and business address of the General Partner are:

Name 9 4 3 4 9 4 Maguire Road Property, Inc. Address

6355 Metrowest Boulevard, Suite 330 Orlando, Florida 32835

5. The mailing address for the Partnership is 6355 Metrowest Boulevard, Suite 330, Orlando, Florida 32835.

- 6. The latest date upon which the Partnership shall dissolve is December 31, 2100.
- 7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by the General Partner.

This Certificate of Limited Partnership was executed by the General Partner this 1st day of May, 2000.

MAGUIRE ROAD PROPERTY, INC., as General Partner

Nancy A. Rossman, President

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for Maguire Road Property, Ltd, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity, and I further agree to comply with provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

Nancy A. Rossman

Date: May 1, 2000

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SECRETARY OF STATE
SECRETARY OF STATE

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STATE OF FLORIDA

COUNTY OF ORANGE

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared NANCY A. ROSSMAN, President of MAGUIRE ROAD PROPERTY, INC., the sole general partner of MAGUIRE ROAD PROPERTY, LTD., a Florida limited partnership (the "Partnership"), of Orange County, Florida, who upon being duly sworn, certified as follows:

- 1. The amount of the capital contributions to the Partnership made by the limited partners is \$1,000.00.
- 2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$ -0-.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true, to the best of my knowledge and belief.

MAGUIRE ROAD PROPERTY, INC., as General

Partner

Date: May 1, 2000

Nancy A. Rossman, President

Sworn to and subscribed before me this 1st day of May, 2000, by NANCY A. ROSSMAN, President of MAGUIRE ROAD PROPERTY, INC., as General Partner on behalf of MAGUIRE ROAD PROPERTY, LTD., a Florida limited partnership. Said person (check one) is personally known to me, \square produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or \square produced other identification, to wit:

Print Name:

Notary Public - State of Florida

Commission No.:

My Commission Expires:

(NOTARY'S SEAL)

IOTARY PUBLIC - STATE OF FLORIDA CHARLES H. EGERTON COMMESSION & COSTREST EXPIRES 1272/2001 SCNDED THRUASA - SABABATTARWA

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