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CORPDIRECT AGENTS, INC. (formerly CCRS)
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TALLAHASSEE, FL 32301
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CONTACT: KATIE WONSCH

DATE: 5/6/04

REF. #: 0672.26018

CORP. NAME: TWO CORNERS LIMITED PARTNERSHIP

( ) ARTICLES OF INCORPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT	( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME
( ) FOREIGN QUALIFICATION	(XX) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY
( ) REINSTATEMENT	( ) MERGER	( ) WITHDRAWAL
( ) CERTIFICATE OF CANCELLATION		
( ) OTHER:		

STATE FEES PREPAID WITH CHECK# 508220 **FOR $** 148.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: $**_____

PLEASE RETURN:

( ) CERTIFIED COPY	( ) CERTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPY
(XX) CERTIFICATE OF STATUS		

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP OF TWO CORNERS LIMITED PARTNERSHIP

The undersigned hereby executes and swear to this Certificate of Limited Partnership for the purpose of forming a limited partnership under the laws of the State of Florida:

1. **Name of Partnership**. The name of the Partnership shall be **TWO CORNERS LIMITED PARTNERSHIP** (the "Partnership").

2. **Address of Recordkeeping Office; Agent for Service of Process**. The records to be kept pursuant to *Florida Statutes* Section 620.106 shall be located at 4622 Gall Boulevard, Zephyrhills, Florida 33541-6237, and the name of the Partnership's agent for service of process at said address is LOIS R. LINVILLE.

3. **Names and Addresses of the General Partners**. The names and addresses of the General Partners are as follows:

Name	Address
LOIS R. LINVILLE	Post Office Box 9005 Zephyrhills, Florida 33539-9005
TERRY LINVILLE	Post Office Box 9005 Zephyrhills, Florida 33539-9005
DANNY LINVILLE	Post Office Box 9005 Zephyrhills, Florida 33539-9005

4. **Mailing Address for the Limited Partnership**. The mailing address for the Partnership shall be Post Office Box 9005, Zephyrhills, Florida 33539-9005.

5. **Term**. The term for which the Partnership is to exist shall be fifty (50) years from the filing of this Certificate in the Office of the Secretary of State of the State of Florida, unless sooner terminated in accordance with a Limited Partnership Agreement for **TWO CORNERS LIMITED PARTNERSHIP.**

DATED this 13th day of April, 2004.

GENERAL PARTNERS:

Lois R. Linville
LOIS R. LINVILLE

Terry Linville
TERRY LINVILLE

Danny Linville
DANNY LINVILLE

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the Partnership, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

DATED: April 13, 2004

Lois R. Linville

LOIS R. LINVILLE

AFFIDAVIT OF CAPITAL CONTRIBUTIONS OF TWO CORNERS LIMITED PARTNERSHIP

The undersigned, being all of the General Partners of **TWO CORNERS LIMITED PARTNERSHIP**, a Florida limited partnership (the "Partnership"), who, upon being sworn, certify as follows:

1. The limited partners have contributed $5,000.00 of capital to the Partnership.

2. It is not anticipated that the limited partners will make additional contributions in the future.

DATED this 13th day of April, 2004.

FURTHER AFFIANTS SAYETH NOT.

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

GENERAL PARTNERS:

LOIS R. LINVILLE

TERRY LINVILLE

DANNY LINVILLE

STATE OF FLORIDA
COUNTY OF PASCO

The foregoing instrument was acknowledged before me this 13th day of APRIL, 2004, by LOIS R. LINVILLE, TERRY LINVILLE and DANNY LINVILLE, the General Partners of the Partnership, who are personally known to me.

Notary Public
Print Name: CHARLOTTE A. RINALDO
Commission No: DD280394
My Commission Expires: 2/24/08

Charlotte A. Rinaldo
Commission #DD280394
Expires: Feb 24, 2008
Bonded Thru
Atlantic Bonding Co., Inc.