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FLORIDA LIMITED PARTNERSHIP

NUEVA TIERRA, LTD

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CERTIFICATE OF LIMITED PARTNERSHIP

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 TALLAHASSEE, FLORIDA

- 1. **Name of Limited Partnership:**
NUEVA TIERRA, LTD
- 2. **Business Address of Limited Partnership:**
1390 South Dixie Highway, Suite 2120, Coral Gables, FL 33146
- 3. **Name of Registered Agent for Service of Process:**
ARAZOZA & FERNANDEZ-FRAGA, PA
- 4. **Florida Street Address for Registered Agent:**
2100 Salzedo Street, Suite 300, Coral Gables, FL 33134
- 5. **Registered Agent signature accepting designation as Agent for Service of Process:**


6. **Mailing Address of Limited Partnership:**
1390 South Dixie Highway, Suite 2120, Coral Gables, FL 33146

7. **Duration of the Limited Partnership:**
PERPETUAL DURATION

8. **Name of General Partner**
ARMANDO J. GUERRA

Street Address of General Partner
1390 South Dixie Highway
Suite 2120
Coral Gables, FL 33146

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 11 day of November, 2004

Signature of the General Partner:


ARMANDO J. GUERRA

((H04000227695))

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting the sole General Partner of NUEVA TIERRA, LTD., a Florida Limited Partnership, certify:

The amount of capital contributions to date of the Limited Partners is \$1,000.00

The total amount contributed and anticipated to be contributed by the Limited Partners at this time totals \$1,000.00

Signed this 11 day of November, 2004

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signature of the General Partner:

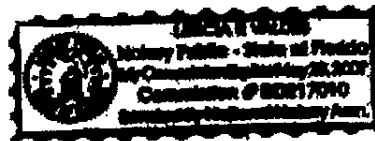

ARMANDO J. GUERRA

STATE OF FLORIDA)
) ss
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 11 day of November, 2004 by Armando Guerra, who is personally known to me or who has produced personally known as identification, and who did take an oath,


NOTARY PUBLIC - STATE OF FLORIDA

My commission expires:



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