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2004 JAN -5 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

cp

Victor J. Mazzella  
1408 S.E. 17th Avenue, Suite F  
Cape Coral, Florida 33990  
(239) 772-2229

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

January 3, 2005

RE: VAM FAMILY LIMITED PARTNERSHIP, LTD.

Dear Sir or Madam,

Enclosed please find the original and one copy of the certificate of limited partnership and affidavit of capital contributions for VAM FAMILY LIMITED PARTNERSHIP, LTD.

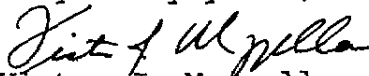
Also enclosed is my check for \$ 87.50 for a filing fee, designation of registered agent and a certified copy of the articles.

Additionally, this is the name requested even though limited partnership and Ltd have similar meanings.

Please file these articles and return a copy and a certificate to me.

If you have any questions, please do not hesitate to contact me.

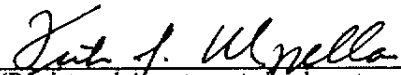
Very truly yours,

  
Victor J. Mazzella

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Encl.

## CERTIFICATE OF LIMITED PARTNERSHIP

1. VAM FAMILY LIMITED PARTNERSHIP, LTD.  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1408 S.E. 17TH AVENUE, SUITE F, CAPE CORAL, FLORIDA 33990  
(Business address of Limited Partnership)
3. VICTOR J. MAZZELLA  
(Name of Registered Agent for Service of Process)
4. 1408 S.E. 17TH AVENUE, SUITE F, CAPE CORAL, FLORIDA 33990  
(Florida street address for Registered Agent)
5.   
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1408 S.E. 17TH AVENUE, SUITE F, CAPE CORAL, FLORIDA 33990  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/2030

8. Name(s) of general partner(s):

Street address:

VICTOR J. MAZZELLA

1408 S.E. 17TH AVENUE, SUITE F

CAPE CORAL, FLORIDA 33990

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

Signed this 3RD day of JANUARY, 2005.

Signature of all general partners:

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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TALLAHASSEE, FLORIDA

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

The undersigned constituting all of the general partners of VAM FAMILY  
LIMITED PARTNERSHIP, LTD.,

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ -0-.

The total amount contributed and anticipated to be contributed by the limited partners at this time  
totals \$ -0-.

Signed this 3RD day of JANUARY, 2005.

FURTHER AFFIANT SAYETH NOT.

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

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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