

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: P.O. Box 10349, Tallahassee, FL 32302

TOLL FREE 1-800-422-8062
FAX 1-800-422-8062

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

BK 5/31/95

FILED	CUS	8.75
R. AGENT FEE		52.50
C. COPY		25.00
TOTAL		96.25
N. BANK		
BALANCE DUE		
REFUND		

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
TIME _____ CK No. _____
BY *SKW* _____

WALK-IN 5-31 2:00
Will Pick Up _____

RE: *Knight's* *Knight's* *Knight's*
of _____ NO 54713

A9500000082C

Capital Exp. Fee _____
Art. of Inc. File _____
Corp. Record Search _____
☒ Ltd. Partnership File _____
☒ Foreign Corp. File _____
☒ () Cert. Copy(s) _____

Art. of Amend. File _____
☒ Dissolution/Withdrawal _____
C U S _____
Fictitious Name File _____

Name Reservation _____
Annual Report/Reinstatement _____
Reg. Agent Service _____
Document Filing _____

Corporate Kit _____
Vehicle Search _____
Driving Record _____
Document Retrieval _____

UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
File No.'s _____ Copies _____
Courier Service _____
Shipping/Handling _____
Phone () _____
Top Priority _____
Express Mail Prep. _____
FAX () _____ pgs. _____

SUBTOTALS _____

FEE.....	
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

STATE OF FLORIDA)
COUNTY OF ALACHUA)

CERTIFICATE OF
LIMITED PARTNERSHIP AGREEMENT
for

KNIGHT'S KROSSING LTD.

The undersigned, desiring to form a Limited Partnership pursuant to the laws of the State of Florida, and being severally duly sworn, certify as follows:

1. The name of the limited partnership is:
KNIGHT'S KROSSING LTD.
2. The principal place of business and the mailing address of the limited partnership is located at:
5700 SW 34th Street, Suite 1307, Gainesville, FL 32608
3. The name and place of residence of each General Partner interested in the limited partnership is as follows:
EarthArt, Incorporated
5700 SW 34th Street, Suite 1307
Gainesville, FL 32608
4. The name and address of the registered agent of this limited partnership is as follows:
Norita V. Davis
20721 S.W. 46th Avenue
Newberry, Florida 32669
5. The term for which the partnership is to exist is from the commencement date of the Agreement and shall continue in force until December 31, 2046 unless sooner terminated as provided in the Limited Partnership Agreement or by operation of law, at the discretion of the General Partner(s); or by the decision of any limited partner.

FILED STATE
SECRETARY OF
DIVISION OF
95 MAY 31 PM 3:38

672,943

DATED; Gainesville, Florida

This 23rd day of May, 1995.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement.

Signed, sealed and delivered
in our presence as witnesses:

Witnessed by:

Lance H. Davis
Lance Davis

Thomas D. Helmus
Thomas D. Helmus

GENERAL PARTNER:

[Signature]
EarthArt, Incorporated
Ronnie C. Davis, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 31 PM 3:38

Witnessed by:

Lance H. Davis
Lance Davis

Thomas D. Helmus
Thomas D. Helmus

LIMITED PARTNER:

[Signature]
Davis Heritage Ltd.
EarthArt, Incorporated,
General Partner
Ronnie C. Davis, President

STATE OF: Florida
COUNTY OF: Alachua

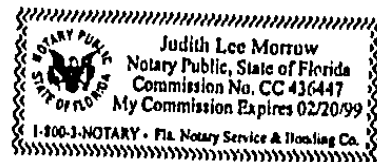
BEFORE ME this day, after being duly sworn, personally appeared Ronnie C. Davis, President of EarthArt, Incorporated, known to me to be the individual described herein, and he acknowledges before me that he executed the foregoing instrument freely and voluntarily for the purposes therein stated.

Sworn to and subscribed before me this 23rd day of May, 1995

Judith Lee Morrow
NOTARY PUBLIC

My Commission Expires:

STATE OF: Florida
COUNTY OF: Alachua

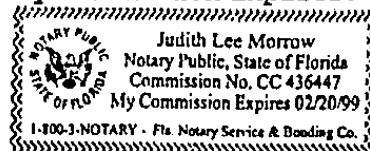


BEFORE ME this day, after being duly sworn, personally appeared Ronnie C. Davis, President of EarthArt, Incorporated, which is General Partner of Davis Heritage Ltd., known to me to be the individual described herein, and he acknowledges before me that he executed the foregoing instrument freely and voluntarily for the purposes therein stated.

Sworn to and subscribed before me this 23rd day of May, 1995.

Judith Lee Morrow
NOTARY PUBLIC

My Commission Expires:



AFFIDAVIT AS TO CAPITAL CONTRIBUTIONS OF LIMITED PARTNERS

BEFORE ME, the undersigned constituting all of the general partners of KNIGHT'S KROSSING LTD., a Florida Limited Partnership, certify as follows:

1. The amount of the capital contributions to date of the limited partner(s) is one hundred dollars (\$100.00).
2. The total amount contributed and anticipated to be contributed by the limited partner(s) at this time totals one hundred dollars (\$100.00).

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION
95 MAY 31 PM 3:38

This 23rd day of May, 1995.

FURTHER AFFIANT SAYETH NOT.

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



General Partner
EarthArt Incorporated
Ronnie C. Davis, President

REGISTERED AGENT DESIGNATION

I Norita V. Davis, do hereby accept the designation as
registered agent for Knight's Crossing Ltd., a Florida Limited
Partnership.

Norita V. Davis
Norita V. Davis

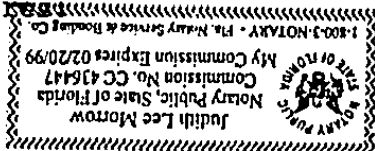
Dated: 5/23/95

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 31 PM 3:38

Sworn to and subscribed before me,
this 23rd day of May, 1995.

Judith Lee Morrow
Judith Lee Morrow

My commission expires



FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 DEC -8 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
KNIGHT'S KROSSING LTD.

1a. DOCUMENT #
A95000000826

96-AR
CM

Mailing Address
5700 S.W. 34TH STREET, SUITE 1307
GAINESVILLE FL 32608

Principal Office Address
5700 S.W. 34TH STREET, SUITE 1307
GAINESVILLE FL 32608

State, Apt. # etc. **680000116589416**
City, State & Zip **12712795-01074-011**
1111292, SU 1111190, 75

2a. New Principal Office Address, if Applicable

State, Apt. # etc.

City, State & Zip

3. (Date Formed or Registered in Florida)
05/31/1995

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Shown on Record
\$100.00

5b. Amount of Capital Contributions in FLORIDA to date

6. FID Number
54-3321970

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$7.75 Additional Fee required for a Certificate of Status.

8. FEES: 1. Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2. Supplemental Fee. \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

DAVIS, NORITA V
20721 S.W. 48TH AVENUE
NEWBERRY FL 32669

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. # etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

EARTHART, INCORPORATED

5700 S.W. 34TH STREET

GAINESVILLE FL 32608

G72943

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate, and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee (empowered) to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

RONNIE C. DAVIS, G.P.

Telephone Number

904-571-8152