

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 922-4003

From: Account Name : MACFARLANE FERGUSON & MCMULLEN
Account Number : 076077001654
Phone : (813) 273-4261
Fax Number : (813) 273-4396

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GOVT-5 P112:03

FLORIDA LIMITED PARTNERSHIP

AGRI FAMILY LTD. PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,785.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAY -5 AM 8:58

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May-05-00 09:47A AGRI/TQ
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FAX AUDIT NO.: H00000025178

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
AGRI FAMILY LTD. PARTNERSHIP**

The undersigned hereby makes, acknowledges and files with the Secretary of State of the State of Florida this Certificate of Limited Partnership for purpose of forming a limited partnership for profit in accordance with the laws of the State of Florida.

1. Name of the Partnership. The name of the partnership shall be "AGRI FAMILY LTD. PARTNERSHIP" (the "Partnership").

2. Office and Agent. CARTER B. McCain shall be the agent for service of process and the address of the record keeping office shall be 400 N. Tampa Street, Suite 2300, Tampa, Florida 33602.

3. Name and Business Address of the General Partner. The name and business address of the General Partner is as follows:

Name
Agri Management Services, LLC
L-5095

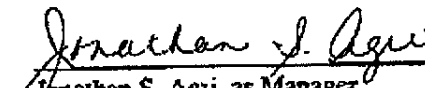
Address
c/o Carter B. McCain
400 N. Tampa Street
Suite 2300
Tampa, FL 33602

4. Mailing Address. The mailing address for the Partnership shall be c/o Carter B. McCain, P.O. Box 1531, Tampa, Florida 33601.

5. Term. The latest date upon which the Partnership is to dissolve shall be December 31, 2050.

IN WITNESS WHEREOF, Jonathan S. Agri, as the Manager of Agri Management Services, LLC, as the sole General Partner, with full authority to execute all documents necessary for the formation of the Partnership, have sworn to and executed this Certificate on this 4th day of May, 2000.

General Partner
Agri Management Services, LLC


Jonathan S. Agri, as Manager

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TALLAHASSEE, FLORIDA

FAX AUDIT NO.: H00000025178

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P.04

FAX AUDIT NO.: H00000025178

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

The undersigned, CARTER B. McCAIN, having been designated as Registered Agent of Agri Family Ltd. Partnership in its agreement of Limited Partnership, hereby accepts such designation and agrees to comply with the provisions of Chapter 620, Florida Statutes.



Carter B. McCain, a Registered Agent
400 N. Tampa Street, Suite 2300
Tampa, Florida 33602

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AFFIDAVIT OF CAPITAL

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

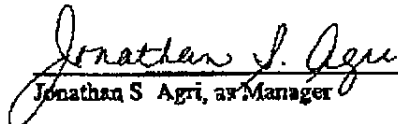
KNOW ALL PERSONS BY THESE PRESENTS, that the undersigned, Jonathan S. Agri, as Manager of Agri Management Services, LLC, as sole General Partner, being sworn, deposes and says as follows:

1. The undersigned is the sole General Partner of the Agri Family Ltd. Partnership, a Florida limited partnership in the process of formation (the "Partnership").
2. The capital contribution of and the amount anticipated to be contributed by the limited partners of the Partnership is \$250,000.

IN WITNESS WHEREOF, the undersigned as the sole General Partner, has hereunto sworn to and executed this Affidavit on the 4th day of May, 2000.

General Partner

Agri Management Services, LLC


Jonathan S. Agri, as Manager

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