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Harry A. Jones  
Attorney at Law

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May 11, 2000

Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32301

Re: Certificate of Limited Partnership  
Smircich Family Partnership, Ltd.

500003254315--4  
-05/16/00--01038--006  
\*\*\*\*507.50 \*\*\*\*507.50

Dear Sir/Madam:

Enclosed find an original and one copy of Certificate of Limited Partnership, Affidavit of Partnership Capital Contribution and Certificate of Acceptance of Registered Agent for the above-captioned Partnership, together with check in the sum of \$507.50 to cover your filing fees, including the Designation of Resident Agent.

Please stamp the copy of the Certificate with the date received in your office and return to the undersigned.

Thank you for your assistance in this matter.

Very truly yours,

*Harry A. Jones*  
Harry A. Jones

HAI/re  
Enc.

FILED  
00 MAY 16 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mtw  
5/22

CERTIFICATE OF LIMITED PARTNERSHIP OF  
SMIRCICH FAMILY PARTNERSHIP, LTD.

The undersigned desiring to form a limited partnership in accordance with the Florida Revised Uniform Limited Partnership Act (1986) and being duly sworn does certify as follows:

1. The name of the Partnership is SMIRCICH FAMILY PARTNERSHIP, LTD.

2. The address of the office of the Partnership is 4200 Iona Street, Titusville, FL 32796. The name and business address of the registered agent of the Partnership is: Frances Smircich, 4200 Iona Street, Titusville, FL 32796

3. The name and business of each partner is as follows:

General Partner

FRANCES SMIRCICH, individually and as  
Trustee of the Frances Smircich Trust  
4200 Iona Street  
Titusville, FL 32796

Limited Partner

FRANCES SMIRCICH, individually and as  
Trustee of the Frances Smircich Trust  
4200 Iona Street  
Titusville, FL 32796

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00 MAY 16 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4. The mailing address of the Partnership is: 4200 Iona Street, Titusville, FL 32796.

5. The Partnership's existence shall begin upon the issuance of a Certificate of Authority to do Business by the State of Florida and shall continue until 1200 noon on December 31, 2040, unless earlier dissolved pursuant to the provisions of this Agreement of Limited Partnership of Smircich Family Partnership, Ltd.

IN WITNESS WHEREOF, the undersigned executed this Certificate as the General Partner  
on the 17th day of April, 2000.

Witnesses:

Harry A. Jones  
Robert L. Ellis

"GENERAL PARTNER"

Frances Smircich  
FRANCES SMIRCICH, individually and as  
Trustee of the FRANCES SMIRCICH TRUST

STATE OF FLORIDA  
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this 17th day of  
April, 2000 by FRANCES SMIRCICH, individually and as Trustee of the Frances  
Smircich Trust, who is personally known to me and who did not take an oath.

Harry A. Jones  
Notary Public, State of Florida  
My Commission Expires:



Harry A. Jones  
MY COMMISSION # CC615693 EXPIRES  
April 12, 2001  
BONDED THRU TREY FAY INSURANCE, INC.

FILED  
MAY 16 AM 10:19  
OFFICE OF THE  
CLERK OF THE  
COURT  
TALLAHASSEE, FLORIDA

AFFIDAVIT OF PARTNERSHIP CAPITAL CONTRIBUTION

STATE OF FLORIDA  
COUNTY OF BREVARD

BEFORE ME, the undersigned Notary Public in the State of Florida, personally appeared FRANCES SMIRCICH, who first being duly sworn, depose and say:

1. That she is the General Partner of SMIRCICH FAMILY PARTNERSHIP, LTD., and as such has full and complete knowledge as to the contents of this Affidavit.

2. That the total maximum amount of capital contributions of the Limited Partner of SMIRCICH FAMILY PARTNERSHIP, LTD. shall be the sum of \$67,500. The Affiant further states that the anticipated total capital contribution of the Limited Partner shall be equal to but not more than \$67,500.

3. That this Affidavit is given pursuant to the provisions of Chapter 620.108, Florida Statutes, and under penalties of perjury.

IN WITNESS WHEREOF, the Affiant has set his hand and seal in Titusville, Brevard County, Florida, this 17th day of April, 2000.

Frances Smircich  
FRANCES SMIRCICH

STATE OF FLORIDA  
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this 17th day of April, 2000 by FRANCES SMIRCICH, who is personally known to me, and an oath was not taken.

Harry A. Jones

Notary Public, State of Florida

My Commission Expires:



Harry A. Jones  
MY COMMISSION # CC615693 EXPIRES  
April 12, 2001  
BONDED THRU TROY FAIR INSURANCE, INC.

FILED  
MAY 16 AM 10:19  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF ACCEPTANCE OF  
REGISTERED AGENT AND STREET ADDRESS FOR  
SERVICE OF PROCESS

Pursuant to Section 48.061, Florida Statutes, I hereby accept the foregoing designation as registered agent of SMIRCICH FAMILY PARTNERSHIP, LTD. for service of process within the State of Florida at 4200 Iona Street, Titusville, FL 32796.

Dated April 17, 2000.

Frances Smircich  
FRANCES SMIRCICH

C:SMIRCICHL-PTS.LTD

FILED  
00 MAY 16 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA