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ATTORNEYS AT LAW

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LAKELAND-MAIN ST. (863) 683-6511 OR (863) 676-6934 FAX (863) 682-8031

> LAKE WALES August 18, 2000

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Secretary of State P.O. Box 5588 Tallahassee, FL 32314

Re: Filing Fees for Seay Family Limited Partnership, a Florida Limited Partnership

To Whom It May Concern:

Enclosed herewith are the following documents with regard to the above referenced along with this firm's check in the amount of \$699.24 to cover filing fees.

Certificate of Limited Partnership	\$52.50
Registered Agent	\$35.00
Affidavit of Capital Contributions	\$536.74
Partnership Registration	\$50.00
LLLP Election	\$25.00

Name 3 3 100 f you should have any questions, please do not hesitate to give me a call at (863) 676-7611.

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Sincerely,

Keith H. Wadsworth

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CERTIFICATE OF LIMITED PARTNERSHIP OF THE SEAY FAMILY LIMITED PARTNERSHIP

The undersigned, for the purpose of forming a limited partnership under the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as set forth in Section 620.101, et. seq. of the Florida Statutes, do hereby certify to the following:

- 1. The name of the limited partnership is "SEAY FAMILY LIMITED PARTNERSHIP".
- 2. The address of the office of the limited partnership required to be maintained by Section 620.105(1), Florida Statutes, is as follows:

247 East Stuart Avenue Lake Wales, FL 33853

3. The name and street address of the registered agent, for service of process on the limited partnership, required to be maintained by Section 620.105(2), Florida Statutes, are as follows:

James P. Seay 247 East Stuart Ave. Lake Wales, FL 33853

4. The name and business address of the general partners are:

James P. Seay 247 East Stuart Ave. Lake Wales, FL 33853

Julie S. Seay 247 East Stuart Ave. Lake Wales, FL 33853

5. The mailing address for the limited partnership is as follows:

247 East Stuart Ave. Lake Wales, FL 33853

6. The latest date upon which the limited partnership is to dissolve is December 31, 2075.

7. An affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners, as required by Section 620.108, Florida Statutes, is attached to this certificate.

IN WITNESS WHEREOF, the undersigned has executed this certificate as of the 17th day of August 2000.

Signed, sealed and delivered in the presence of:

GENERAL PARTNERS:

Printed Name:

JAMES P. SEAY

JAMES P. SEAY

Printed Name:

JULIE S. SEAY

Printed Name:

ACCEPTANCE OF REGISTERED AGENT FOR THE SEAY FAMILY LIMITED PARTNERSHIP

Having been named as registered agent to accept service of process upon the above named partnership, at the address designated in the certificate of limited partnership, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I state that I am a resident of the State of Florida and I am familiar with, and accept, the obligations of my position as registered agent.

Dated: August 17, 2000

AMES P. SEAY

C DA PM II

AFFIDAVIT OF CAPITAL CONTRIBUTIONS TO THE SEAY FAMILY LIMITED PARTNERSHIP

The undersigned affiants, **JAMES P. SEAY and JULIE S. SEAY**, as general partners of the SEAY FAMILY LIMITED PARTNERSHIP, whose address is 247 East Stuart Avenue, Lake Wales, FL 33853, after each being first duly sworn, says upon oath:

- 1. Affiants are the general partners of the **SEAY FAMILY LIMITED PARTNER-SHIP**, a Florida limited partnership.
- 2. The total amount of the capital contributions of the limited partners and the amount of capital anticipated to be contributed by all of the limited partners of the partnership is \$76,677.00. The capital contributed to the partnership may be either cash or property, real or personal, tangible or intangible.
- 3. This affidavit is given for the purpose of complying with the provisions of Section 620.108 of the Florida Statutes.

FURTHER, AFFIANTS DO NOT SAY.

Printed Name:

Printed Name:

JAMES P. SEAY

Printed Name:

JULIE S. SEAY

JULIE S. SEAY

COUNTY OF POLK

Printed Name!
Notary Public
My Commission Expires: 04/16/2004

STATE OF FLORIDA

I HEREBY CERTIFY that on the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared JAMES P. SEAY and JULIE S. SEAY, his wife, as general partners of the SEAY FAMILY LIMITED PARTNERSHIP, who, after being by me first duly sworn, says upon oath the above statements. Sworn to and subscribed before me on this day by, JAMES P. SEAY and JULIE S. SEAY, his wife, as general partners of the SEAY FAMILY LIMITED PARTNERSHIP, on behalf of the partnership. They are personally known to me or have produced a drivers license as identification.

(SEAL)

MARY KAY ROBERTS Notary Public, State of Florida My comm. expires April 16, 2004 Comm. No. CC928205