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William H. Curtis
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(512) 328-4038 fax
CAPTSKAYC@aol.com

September 12, 2000

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****210.00 ****210.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

RE: CERTIFICATE OF LIMITED PARTNERSHIP

ENCLOSED IS MY :

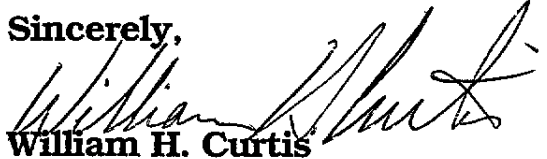
1. CERTIFICATE OF LIMITED PARTNERSHIP APPLICATION
2. AFFIDAVIT OF CAPITAL CONTRIBUTIONS.
3. A CHECK FOR : \$210.00 FOR THE FOLLOWING:

- A. CAPITAL CONTRIBUTION FEE $\$17,500/1000 * \$7.00 =$
\$122.50
- B. REGISTERED REP. FEE \$35.00
- C. REQUEST FOR CERTIFIED COPY \$52.50.

PLEASE SEND THE CERTIFIED COPY TO:

WILLIAM H. CURTIS
1511 MESA RIDGE LANE
AUSTIN, TX 78735

Sincerely,


William H. Curtis

(contact person) 512-328-4003

FILED
00 DEC 18 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A00-1955
q



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 16, 2000

WILLIAM CURTIS
1511 MESA RIDGE LANE
AUSTIN, TX 78735

SUBJECT: THE CURTIS-SCHERER FAMILY LIMITED PARTNERSHIP
Ref. Number: W00000027359

We have received your document for THE CURTIS-SCHERER FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 700A00059164

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP

1. THE CURTIS-SCHERER FAMILY LIMITED PARTNERSHIP
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. MARRIOTT GRANDE VISTA, 11501 INTERNATIONAL DRIVE
(Business address of Limited Partnership) ORLANDO, FL. 32819
3. PAUL C. PARSONS
(Name of Registered Agent for Service of Process)
4. 14530 SW 35th TERR RD. Ocala, FL. 34473-2418
(Florida street address for Registered Agent)
5. Paul C. Parsons
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1511 MESA RIDGE LN. AUSTIN, TX. 78735
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 6/14/2024
8. Name(s) of general partner(s): _____ Street address: _____

William H. Curtis 1511 Mesa Ridge LN
MARGARETHA R. CURTIS Austin, TX 78735

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 12th day of September, 2000.

Signature of all general partners:

William H. Curtis
General Partner

Margaretha R. Curtis
General Partner

General Partner

General Partner

General Partner

General Partner

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TALLAHASSEE, FLORIDA

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

The undersigned constituting all of the general partners of The Curtis-Schener
Family Limited Partnership
a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ \$17,500.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 17,500.00.

Signed this 12th day of September, 2000.

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.

William H. Curtis
General Partner

Margaretta R. Curtis
General Partner

General Partner

General Partner

General Partner

General Partner

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TALLAHASSEE, FLORIDA