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FLORIDA LIMITED PARTNERSHIP

Saxon/Broward, Ltd.

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Certificate of Status	0
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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
SAXON/BROWARD, LTD.**

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SECRETARY OF STATE  
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The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.205 of the Florida Statutes, hereby states the following:


1. The name of the Partnership is Saxon/Broward, Ltd.
2. The business address of the office of the Partnership as referred to in Section 620.108, Florida Statutes, is 908 South Delaney Avenue, Orlando, Florida 32806.
3. The name and address of the Registered Agent for service of process on the Partnership shall be Daryl M. Carter, 908 South Delaney Avenue, Orlando, Florida 32806.
4. The name and business address of the General Partner are:

<u>Name</u>	<u>Address</u>
Maury L. Carter Management Corporation	908 South Delaney Avenue Orlando, Florida 32806

5. The mailing address for the Partnership is 908 South Delaney Avenue, Orlando, Florida 32806.
6. The latest date upon which the Partnership shall dissolve is December 31, 2050.
7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by the General Partner.

This Certificate of Limited Partnership was executed by the General Partner this 20th day of December, 2000.

MAURY L. CARTER MANAGEMENT CORPORATION, a Florida corporation

By:   
Daryl M. Carter, President

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for the above-named Partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity, and I further agree to comply with provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

REGISTERED AGENT

  
Daryl M. Carter

Date: December 20, 2000

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STATE OF FLORIDA

COUNTY OF ORANGE

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared DARYL M. CARTER, President of MAURY L. CARTER MANAGEMENT CORPORATION, the sole general partner of SAXON/BROWARD, LTD., a Florida limited partnership (the "Partnership"), of Orange County, Florida, who upon being duly sworn, certified as follows:

- 1. The amount of the capital contributions to the Partnership made by the limited partners is \$681,943.00.
- 2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$ -0-.

FURTHER AFFIANT SAYETH NOT.

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


MAURY L. CARTER MANAGEMENT CORPORATION

Date: December 20, 2000

By: *[Signature]*  
Daryl M. Carter, President

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Sworn to and subscribed before me this 20<sup>th</sup> day of December, 2000, by DARYL M. CARTER, President of MAURY L. CARTER MANAGEMENT CORPORATION, as the sole General Partner on behalf of SAXON/BROWARD, LTD., a Florida limited partnership. He (check one)  is personally known to me,  produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or  produced other identification, to wit: \_\_\_\_\_


 Joan M. Fisher  
 Notary Public, State of Florida  
 Commission No. CC 664082  
 My Commission Exp. 07/16/2001  
 Bonded Through Fla. Notary Service & Bonding Co.

*[Signature]*  
 Print Name: Joan M Fisher  
 Notary Public - State of Florida  
 Commission No.: CC664082  
 My Commission Expires: 07 16 2001