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December 18, 2000

VIA OVERNIGHT CARRIER

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Kri-Tray II Limited Partnership

Dear Sir/Madam:

A-2015

Enclosed is the original and one copy of (1) a Certificate of Limited Partnership, and (2) an Affidavit of Capital Contributions for Florida Limited Partnership for Kri-Tray II Limited Partnership. Please see that these documents are filed as soon as possible. I would appreciate your date-stamping the copies, and returning them to me in the self-addressed, stamped, envelope I have enclosed for your convenience. I would also like to obtain a Certificate of Existence for this Limited Partnership. A check in the amount of \$1,793.75 made payable to the Florida Department of State is enclosed to cover the filing fee, the fee for designation of a registered agent, and the fee for the certificate of existence.

When the Certificate of Limited Partnership has been processed, please return acknowledgement of the filing and the Certificate of Existence to me in the return Federal Express envelope which is also enclosed. My address and phone number are as follows:

Ronald L. Rowland, Esq.
Vorys, Sater, Seymour and Pease LLP
52 East Gay Street
Columbus, OH 43215
Phone: 614-464-6392

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TALLAHASSEE FLORIDA

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Florida Department of State
December 18, 2000
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Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "Ron Rowland".

Ronald L. Rowland
(Florida Bar Number 169363)

Enclosures

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TALLAHASSEE FLORIDA

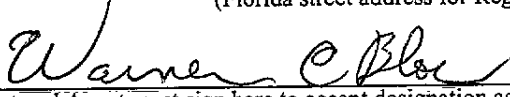
CERTIFICATE OF LIMITED PARTNERSHIP

1. Kri-Tray II Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

 2. 8153 Via Vecchia, Naples, Florida 34108-7701
(Business address of Limited Partnership)

 3. Warner C. Blow
(Name of Registered Agent for Service of Process)

 4. 8153 Via Vecchia, Naples, Florida 34108-7701
(Florida street address for Registered Agent)

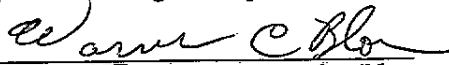
 5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

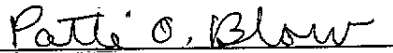
 6. 8153 Via Vecchia, Naples, Florida 34108-7701
(Mailing Address of the Limited Partnership)
-
7. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2050
8. Name(s) of general partner(s): _____ Street address: _____
- | | | |
|-----------------------|--|-------------------|
| <u>Warner C. Blow</u> | <u>8153 Via Vecchia, Naples, Florida</u> | <u>34108-7701</u> |
| <u>Patti O. Blow</u> | <u>8153 Via Vecchia, Naples, Florida</u> | <u>34108-7701</u> |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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 December, 2000

Signature of all general partners:


General Partner Warner C. Blow


General Partner Patti O. Blow

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 Kri-Tray II
Limited Partnership
a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 0.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 1,000,000.

Signed this 12th day of December, 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.*

Warner C. Blow

General Partner Warner C. Blow

Patti O. Blow

General Partner Patti O. Blow

General Partner

General Partner

General Partner

General Partner

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TALLAHASSEE FLORIDA

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