



THE UNITED STATES
CORPORATION
COMPANY

ADDUVO 2058

ACCOUNT NO. : 072100000032

REFERENCE : 947170 4732152

AUTHORIZATION : *Patricia Pujols*

COST LIMIT : \$ 1837.50

FILED
00 DEC 28 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : December 28, 2000

ORDER TIME : 11:03 AM

ORDER NO. : 947170-010

CUSTOMER NO: 4732152

200003516022--3

CUSTOMER: Ms. Tristan Hoffman
Gartner Brock & Simon

Suite 203
1660 Prudential Drive
Jacksonville, FL 32207

400800064798

DOMESTIC FILING

NAME: MAGDALENE CENTER, LTD.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

RECEIVED
00 DEC 28 PM 12:15
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILE 2ND

CONTACT PERSON: Tamara Odom - EXT. 1104
EXAMINER'S INITIALS: _____

3K 12/24

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
MAGDALENE CENTER, LTD.**

00 DEC 28 PM 4:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited partnership under the laws of the State of Florida, do hereby certify as follows:


1. The name of the limited partnership is MAGDALENE CENTER, LTD.
2. The mailing address of the partnership is 15436 North Florida Avenue, Suite 101, Tampa, Florida 33617.
3. The name and principal business address of the general partner of the partnership is MAGDALENE GP, LLC, a Florida limited liability company, 15436 North Florida Avenue, Suite 101, Tampa, Florida 33617. L00000616231
4. The term for which the partnership shall exist shall commence on the date hereof and shall continue for thirty (30) years from such date, unless the partnership is sooner dissolved and terminated as provided by law or in the Agreement of Limited Partnership by which the partnership shall be governed.
5. The street address of the registered office for the partnership is 15436 North Florida Avenue, Suite 101, Tampa, Florida 33617, and the name of the registered agent for service of process at that address is W. Parkinson Myers, who is joining in the execution hereof for the purpose of accepting the appointment as registered agent for service of process for the partnership.

IN WITNESS WHEREOF, the undersigned have executed this Certificate this 20th day of December, 2000.


General Partner:

MAGDALENE CENTER GP, LLC, a
Florida limited liability company

By: Coro Investments, LLC, a
Delaware limited liability
company, its Manager

By: 
Victor Fransen, its Manager

Registered Agent:


W. Parkinson Myers, Manager

AFFIDAVIT REGARDING
CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority personally appeared W. PARKINSON MYERS, as an authorized representative of MAGDALENE CENTER GP, LLC, a Florida limited liability company, the General Partner of MAGDALENE CENTER, LTD., a Florida limited partnership, who being first duly sworn, declared as follows:

1. That MAGDALENE CENTER GP, LLC, is the general partner of MAGDALENE CENTER, LTD., a Florida corporation.

2. The capital contributions to said limited partnership as of the date hereof totals \$100.00.


3. The total amount contributed at this time is \$100.00 and the amount anticipated to be contributed by the limited partners totals \$850,000.00.

4. This Affidavit is given in compliance with the provisions of Florida Revised Uniform Limited Partnership Act (1986).

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.

MAGDALENE CENTER GP, LLC, a
Florida limited liability company, its
general partner

By: Coro Investments, LLC, a
Delaware limited liability
company, its Manager

By: 
Victor Fransen, its Manager

00 DEC 28 PM 4:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

This foregoing instrument was acknowledged before me this 20th day of December, 2000, by Victor Fransen, as the Manager of Coro Investments, LEC, a Delaware limited liability company, the manager of Magdalene Center GP, ELC, the General Partner of Magdalene Center, Ltd., on behalf of the partnership, who is either (X) personally known to me or () has produced _____ identification.

Linda Feyl
Notary Public, State of Florida, at Large
Print Name: LINDA FEYL
My Commission Expires:

