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LAKE WALES
October 11, 2000

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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-01/17/01--01009--011
***1810.00 ***1785.00

Re: Filing Fees for "NKST FAMILY LIMITED PARTNERSHIP"

Enclosed for filing are the following documents along with this firm's check in the amount of \$1,810.00:

1. Certificate of Limited Partnership of the NKST FAMILY LIMITED PARTNERSHIP
Registered Agent
2. Statement of Qualification

Upon approval and filing of these documents, please furnish copies to the attention of

Keith H. Wadsworth
Peterson & Myers, P.A.
P.O. Box 1079
Lake Wales, FL 33859-1079

If anything further is required, please call me. Thank you for your assistance in this matter.

Sincerely,

Keith H. Wadsworth/mr

Keith H. Wadsworth

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SECOND FLOOR
TALLAHASSEE, FLORIDA

/mr
enclosures

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**CERTIFICATE OF LIMITED PARTNERSHIP
OF THE
NKST 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 "NKST 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:

220 East Main Street
Bartow, FL 33830

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:

Nelle Kennedy Stuart Terry
220 East Main Street
Bartow, FL 33831

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

Nelle Kennedy Stuart Terry
P.O. Box 1382
Bartow, FL 33831

Fleetwood Tait Lane, Jr.
636 Diana Drive
Charlotte, NC 28203

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

220 East Main Street
Bartow, FL 33830

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TALLAHASSEE, FLORIDA

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 30th day of October 2000.

Signed, sealed and delivered
in the presence of:

GENERAL PARTNER:

Darlene R. Mills
Printed Name: Darlene R. Mills

Nelle Kennedy Stuart Terry
NELLE KENNEDY STUART TERRY

Joel L. Green
Printed Name: Joel L. Green

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TALLAHASSEE, FLORIDA

GENERAL PARTNER:

Fleetwood Tait Lane, Jr.
Printed Name:


FLEETWOOD TAIT LANE, JR.


Printed Name: SAMANTHA MEARNS.

SCOTT E. MANNING
SCOTT E MANNING.

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SECOND JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

**ACCEPTANCE OF
REGISTERED AGENT FOR THE
NKST 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: October 30, 2000.


NELLE KENNEDY STUART TERRY

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TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
TO THE NKST FAMILY LIMITED PARTNERSHIP**

The undersigned affiants, **NELLE KENNEDY STUART TERRY** and **FLEETWOOD TAIT LANE, JR.**, as general partners of the NKST FAMILY LIMITED PARTNERSHIP, whose address is 220 East Main Street, Bartow, FL 33830 after each being first duly sworn, says upon oath:

1. Affiants are the general partners of the **NKST FAMILY LIMITED PARTNERSHIP**, 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 \$2,500,000.00. 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, AFFILIANTS DO NOT SAY.

GENERAL PARTNER:

Darlene R. Mills
Printed Name: Darlene R. Mills

Nelle Kennedy Stuart Terry
NELLE KENNEDY STUART TERRY

David L. Green
Printed Name: David L. Green

STATE OF Florida
COUNTY OF Polk

I HEREBY CERTIFY that on the 30th day of October, 2000, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared **NELLE KENNEDY STUART TERRY**, as general partner of the NKST 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, **NELLE KENNEDY STUART TERRY**, as general partner of the NKST FAMILY LIMITED PARTNERSHIP, on behalf of the partnership. He or she is personally known to me or has produced FDL T600-637-41-713 as identification.

(SEAL)



Darlene R. Mills
Printed Name: Darlene R. Mills
Notary Public
My Commission Expires:

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TALLAHASSEE, FL 32301
SECRETARY OF STATE

GENERAL PARTNER:

Fleetwood Tait Lane, Jr.
Printed Name:

[Signature]
Printed Name: Keith H. Wadsworth

[Signature]
FLEETWOOD TAIT LANE, JR.

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

I HEREBY CERTIFY that on the 17th day of OCTOBER, 2000, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared **FLEETWOOD TAIT LANE, JR.**, as general partner of the NKST 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, **FLEETWOOD TAIT LANE, JR.**, as general partner of the NKST FAMILY LIMITED PARTNERSHIP, on behalf of the partnership. He or she is personally known to me or has produced NCDL 738 2020 as identification.

(SEAL)

[Signature]
Printed Name: Samantha Marius
Notary Public
My Commission Expires: 10/28/2004

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA