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MJH

February 6, 2001

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*****105.00 *****105.00

Florida Department of State
ATTN: LIMITED PARTNERSHIPS
P.O. Box 6327
Tallahassee, FL 32314

RE: United Associates Mortgage Services, Ltd.

Dear Sir or Madam:

Enclosed please find the following documents for filing in conjunction with the above referenced limited partnership:

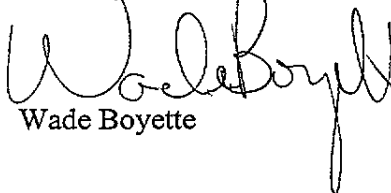
Certificate of Limited Partnership (original and one copy);
Affidavit of Capital Contributions (original and one copy)

together with this firm's check in the sum of \$105.00 representing the filing fee and registered agent fee. Please return a stamped copy to our office.

If you have any questions regarding this matter, please contact our office.

Very truly yours,

GRAY, HARRIS, ROBINSON,
HOVIS, BOYETTE & CRAWFORD, P.A.


Wade Boyette

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 FEB - 8 PM 3: 58

KWB/jcg
Enclosures



MELBOURNE

ORLANDO

TALLAHASSEE

TAMPA

**CERTIFICATE OF
LIMITED PARTNERSHIP OF
UNITED ASSOCIATES MORTGAGE SERVICES, LTD.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 FEB -8 PM 3:58

The undersigned, constituting all of the general partners, hereby execute this Certificate of Limited Partnership for the purpose of forming a limited partnership under the laws of the State of Florida.

1. **Name of Partnership.** The name of the Partnership shall be UNITED ASSOCIATES MORTGAGE SERVICES, LTD.

2. **Address of Recordkeeping Office; Agent for Service of Process.** The records to be kept pursuant to Florida Statute Section 620.106, shall be located at 301 N. U.S. Highway 27, Suite H, Clermont, FL 34711, and the name of the Partnership's agent for service of process is Kathryn I. Weed, and the address of the registered agent is 301 N. U.S. Highway 27, Suite H, Clermont, FL 34711.

3. **Name and Business Address of the General Partners.**

(a) The name and address of the General Partners are:

<u>Name</u>	<u>Address</u>
Weed & Associates Title Services, Inc. P98000040546	301 N. U.S. Highway 27, Suite H Clermont, FL 34711


4. **Mailing Address for the Limited Partnership.** The mailing address for the Limited Partnership shall be 301 N. U.S. Highway 27, Suite H, Clermont, FL 34711.

5. **Term.** The term for which the Partnership is to exist shall be from the filing of this Certificate in the Office of the Secretary of State of the State of Florida until the 31st day of December, 2050, unless sooner terminated in accordance with the Limited Partnership for United Associates Mortgage Services, Ltd.

DATED this 18 day of January, 2001.

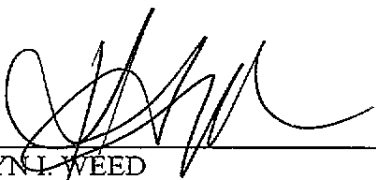
Under the penalties of perjury, we declare that we have read the foregoing and that the facts alleged are true, to the best of our knowledge and belief.

WEED & ASSOCIATES TITLE SERVICES, INC.

By: 
General Partner Kathryn I. Weed, President

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within Limited Partnership, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.


KATHRYN I. WEED

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting all of the general partners of UNITED ASSOCIATES MORTGAGE SERVICES, LTD., a Florida Limited Partnership, certify as follows:

1. To date, the amount of capital contribution of the limited partner is \$ 19,000.⁰⁰.
2. The total amount contributed and anticipated to be contributed by the limited partner at this time totals \$ 19,000.00.

DATED this 18 day of JANUARY, 2001.

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

WEED & ASSOCIATES TITLE SERVICES, INC.

By: _____



General Partner

Kathryn I. Weed, President