



# A01000001092

ACCOUNT NO. : 072100000032

REFERENCE : 427565 82866A

AUTHORIZATION :

COST LIMIT : \$ ~~87.50~~

ORDER DATE : August 16, 2001

ORDER TIME : 11:23 AM

ORDER NO. : 427565-005

CUSTOMER NO: 82866A

CUSTOMER: Ronald L. Clark, Esq  
Clark & Campbell, P.a.

4740 Cleveland Heights Blvd

Lakeland, FL 33813

DOMESTIC FILING

NAME: WALDEN WOODS II, LTD.

EFFECTIVE DATE:

       ARTICLES OF INCORPORATION  
XX        CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
XX        CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson - EXT. 1155

EXAMINER'S INITIALS:

NOT RECORDED  
TO AGENCY OF FILING

2001 AUG 16 PM 12:14

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

RECEIVED

FILED  
01 AUG 16 PM 2:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP OF  
WALDEN WOODS II, LTD.  
A Florida limited partnership**

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986), hereby states:

1. The name of the Partnership is: **WALDEN WOODS II, LTD.**
2. The address of the office of the Partnership is: 5015 South Florida Avenue, Lakeland, Florida 33813.
3. The name and address of the agent for service of process on the Partnership is Lawrence T. Maxwell, 5015 South Florida Avenue, Lakeland, Florida 33813.

I accept the designation as Registered Agent for Service of Process:

  
Lawrence T. Maxwell

G23570

4. The name and business address of the general partner is: CRF Management Co., Inc., a Florida corporation, 5015 South Florida Avenue, Lakeland, Florida 33813.
5. The mailing address for the Partnership is: 5015 South Florida Avenue, Lakeland, Florida 33813.
6. The latest upon which the Partnership shall dissolve is December 31, 2030.

Under penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the General Partner of Walden Woods II, Ltd., this 15 day of August, 2001.

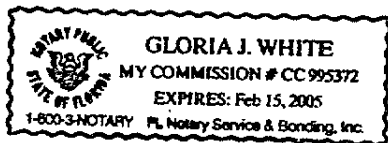
Signature of General Partner:  
CRF Management Co., Inc.,  
a Florida corporation


By:

  
Lawrence T. Maxwell, its President

STATE OF FLORIDA  
COUNTY OF POLK

The foregoing instrument was acknowledged before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Lawrence G. Maxwell, President of CRF Management Co., Inc., a Florida corporation, to me personally known or known to me by evidence of identification of \_\_\_\_\_ to be the person(s) described in and who executed the foregoing instrument and who did not take an oath, on this 15 day of August, 2004.



  
Notary Signature

Notary Public  
State of Florida  
My commission expires:

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS OF  
WALDEN WOODS II, LTD.**

STATE OF FLORIDA  
COUNTY OF POLK

BEFORE ME, the undersigned authority, personally appeared Lawrence T. Maxwell, President of CRF Management Co., Inc., a Florida corporation, the general partner of WALDEN WOODS II, LTD. (the "Partnership"), who, being sworn, certifies as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, \$1,000.00.
2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

Signed this 15 day of August, 2001.

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.

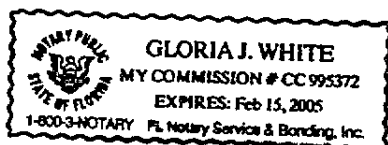
GENERAL PARTNER:

CRF Management Co., Inc., a Florida corporation

By: [Signature]  
Lawrence T. Maxwell, its President

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SWORN TO before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared, LAWRENCE T. MAXWELL, President of CRF MANAGEMENT CO., INC., a Florida corporation, to me personally known or known to me by evidence of \_\_\_\_\_ to be the person described in and who executed the foregoing instrument and who did not take an oath.



[Signature]  
Notary Signature

Notary Public  
State of Florida  
My commission expires: