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DEC 18 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 410879 82866A

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : \$ 148.75

ORDER DATE : December 18, 2001

ORDER TIME : 11:28 AM

100004730501--5

ORDER NO. : 410879-005

CUSTOMER NO: 82866A

CUSTOMER: H. Adam Airth, Jr., Esq  
Clark, Campbell & Mawhinney,  
P.a.  
4740 Cleveland Heights Blvd

Lakeland, FL 33813

DOMESTIC FILING

NAME: CENTURY - FAIRFIELD VILLAGE,  
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  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - EXT. 1118

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
01 DEC 18 PM 12:17  
DIVISION OF CORPORATION

**CERTIFICATE OF LIMITED PARTNERSHIP OF  
CENTURY - FAIRFIELD VILLAGE, LTD.  
a Florida limited partnership**

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TALLAHASSEE, FLORIDA

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

1. The name of the Partnership is: **CENTURY - FAIRFIELD VILLAGE, LTD.**
2. The street and mailing address of the principal office of the Partnership is: 500 South Florida Avenue, Suite 700, Lakeland, Florida 33813.
3. The name and address of the agent for service of process on the Partnership is Lawrence T. Maxwell, 500 South Florida Avenue, Suite 700, Lakeland, Florida 33813.

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
\_\_\_\_\_  
Lawrence T. Maxwell

G23570

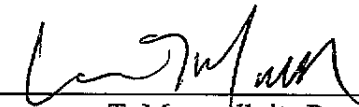
4. The name and business address of the sole general partner is: CRF Management Co., Inc., a Florida corporation, 500 South Florida Avenue, Suite 700, Lakeland, Florida 33813.
5. The latest upon which the Partnership shall dissolve is December 31, 2031.

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 Century - Fairfield Village, Ltd., this 17<sup>th</sup> day of December, 2001.

CRF Management Co., Inc., a Florida  
corporation, General Partner

By: \_\_\_\_\_

  
Lawrence T. Maxwell, its President

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS OF  
CENTURY - FAIRFIELD VILLAGE, LTD.**

STATE OF FLORIDA  
COUNTY OF POLK

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BEFORE ME, the undersigned authority, personally appeared Lawrence T. Maxwell, President of CRF Management Co., Inc., a Florida corporation, the sole general partner of CENTURY - FAIRFIELD VILLAGE, 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.

FURTHER AFFIANT SAYETH NOT.

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.

Signed this 13 day of December, 2001.

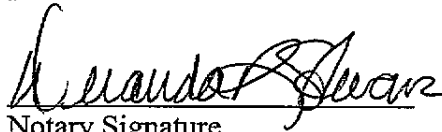
GENERAL PARTNER:  
CRF Management Co., Inc.,  
a Florida corporation

By:   
Lawrence T. Maxwell, its President

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.



Deranda R. Stevens  
MY COMMISSION # DD074750 EXPIRES  
November 27, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.

  
Notary Signature  
Notary Public  
State of Florida  
My commission expires: