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Limited Liability	Change of Registered	Agent		
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#### CERTIFICATE OF LIMITED PARTNERSHIP

**OF** 

## CARRELL VILLAGE, LTD.

The undersigned, pursuant to the provisions of Section 620.108 of the Florida Statutes, dhereby certify and swear in this Certificate of Limited Partnership to the following:

#### 1. NAME

The name of the Limited Partnership is:

CARRELL VILLAGE, LTD.

## 2. REGISTERED AGENT

The name and address of the Registered Agent for the Limited Partnership is:

Renée Fowler 110 Bry Lynn Drive West Melbourne, Florida 32904

## 3. GENERAL PARTNER

The names and business address of the general partner is as follows:

Carrell Village Partners, LLC 110 Bry Lynn Drive L02-8272 West Melbourne, Florida 32904

## 4. MAILING ADDRESS

The mailing address for the Limited Partnership and the location of its principal place of business is as follows:

c/o Regency Development Associates, Inc. 110 Bry Lynn Drive West Melbourne, Florida 32904

## 5. **DISSOLUTION DATE**

The latest date upon which the Limited Partnership is to dissolve is December 31, 2052.

IN WITNESS WHEREOF, the General Partner has executed this Certificate of Limited Partnership this  $18^{\rm th}$  day of March, 2002.

Carrell Village Partners, LLC A Florida Limited Liability Company

# **ACCEPTANCE**

Pursuant to Section 620.192 of the Florida Statutes, the undersigned accepts its appointment as registered agent for CARRELL VILLAGE, LTD., a Florida limited partnership, and accepts all obligations imposed on it as such under Florida law.

Executed this 18th day of March, 2002

Renée Fowler

#### **AFFIDAVIT**

STATE OF Florida )

COUNTY OF Brevard )

The undersigned as a general partner of CARRELL VILLAGE, LTD. ("Limited Partnership"), declares as follows:

The total capital contributions of the limited partners of the Limited Partnership through this date is \$1,000 and the total anticipated future capital contributions of the limited partners to the Limited Partnership is \$1,000.

Carrell Village Partners, LLC

A,Florida Limited Liability Company

As forda Chiched Liability Company

STATE OF Plotida ) SS:

The foregoing instrument was acknowledged before me this 18th day of March, 2002 by Kono Coulon of Carrell Village Partners, LLC, a Florida Limited Liability Company. He/she is personally known to me or has produced

JENNIFER A WEISS

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as identification.

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Printed Name: <u>New Medicals</u>