

Florida Department of State

Division of Corporations **Public Access System** Katherine Harris, Secretary of State

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From:

: AKERMAN SENTERFITT - TAMPA Account Name

Account Number : I20000000249 Phone : (813)223-7333 Fax Number : (813)223-2837

FLORIDA LIMITED PARTNERSHIP

	SID AND	GWENDOLYN WALKER F	AMILY LIMITE	D PARTNERSHI
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		Estimated Charge	\$1,846.25	

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CERTIFICATE OF LIMITED PARTNERSHIP OF DAVID AND GWENDOLYN WALKER FAMILY LIMITED PARTNERSHIP A Florida Limited Partnership

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Section 620.108, Florida Statutes, hereby states the following:

- 1. The name of the Partnership is DAVID AND GWENDOLYN WALKER FAMILY LIMITED PARTNERSHIP.
- 2. The business address of the Partnership is 14388 Eagle Point Drive, Clearwater, Florida 33762.
- β. The name and address of the agent for service of process on the Partnership is William Kalish, Esq., Akerman, Senterfitt & Eidson, P.A., First Union Building, 100 South Ashley Drive, Suite 1500, Tampa, Florida 33602.
 - 4. The names and business addresses of the General Partner is as follows:

GENERAL PARTNER

ADDRESS

14388 Eagle Point Drive SA Clearwater, Florida 33762

WALKER FAMILY MANAGEMENT, LLC

1 1 2 - 8 - 77 6

5. The mailing address of the Partnership is 14388 Eagle Point Drive, Clearwater, Florida 33762.

6. The latest date upon which the Partnership shall dissolve is April 30, 2052.

The execution of this Certificate by the undersigned General Partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of David and Gwendolyn Walker Family Limited Partnership this 12th day of April, 2002.

DAVID AND GWENDOLYN WALKER FAMILY LIMITED PARTNERSHIP

By: GWENDOLYN L.B. WALKER, Managing Member, WALKER FAMILYMANAGEMENT, LLC, General Partner

{TP052973;1}

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for DAVID AND GWENDOLYN WALKER FAMILY LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of the registered agent.

REGISTERED AGENT

{TP052973;1}

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared GWENDOLYN L.B. WALKER, the Managing Member of Walker Family Management, LLC, a Florida limited liability company, the General Partner of the David and Gwendolyn Walker Family Limited Partnership, a Florida limited partnership, hereinafter referred to as the "Partnership," who upon being duly sworn, certify as follows:

- The amount of capital contributions of the limited partners is \$1,000.00.
- 2. The estimated total amount contributed and anticipated to be contributed by the limited partners at this time is \$2,400,000.00.

DATED this 12th day of April, 2002.

AFFIANT SAYS NOTHING FURTHER.

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.

DAVID AND GWENDOLYN WALKER FAMILY LIMITED PARTNERSHIP

By-GWENDOLYN L.B. WALKER, Managing Member WALKER FAMILY MANAGEMENT, LLC, General Partner

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 12th day of April 2002, by GWENDOLYN L.B. WALKER, who is personally known to me or who produced as identification.



NOTARY PUBLIC
Print Name:

My Commission Expires:

(TP052973;1)