

April 24, 2002

Division of Corporations  
Secretary of State of Florida  
Post Office Box 6327  
Tallahassee, Florida 32314

700005371327--0  
-04/29/02--01113--017  
\*\*\*\*\*96.25 \*\*\*\*\*96.25

Re: Filing of The Whitmire Family Partners, Ltd., Dated February 26, 2002

Gentlemen:

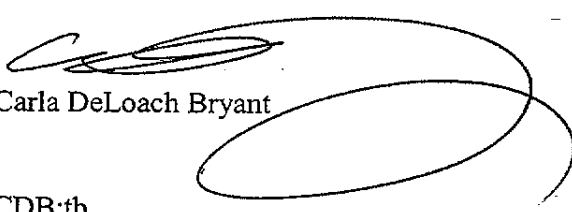
With reference to the filing of the above-referenced family limited partnership, enclosed please find the following:

1. Certificate of Limited Partnership of Whitmire Family Partners, Ltd., a Florida Limited Partnership, including the Registered Agent designation;
2. Affidavit of Capital Contributions; and
3. Check in the amount of \$96.25, representing the applicable filing fee of \$52.50, Registered Agent's fee of \$35.00, and \$8.75 for a status certificate to be mailed to my office.

FILED  
APR 24 PM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Thank you for your cooperation and assistance. I remain,

Very truly yours,

  
Carla DeLoach Bryant

CDB:tb  
Enclosures  
cc: Betty Whitmire  
Carter C. Whitmire, Jr.

AD2-656  
OK

CERTIFICATE OF LIMITED PARTNERSHIP OF  
WHITMIRE FAMILY PARTNERS, LTD.  
a Florida Limited Partnership

The undersigned sole General Partner, desiring to form a limited partnership pursuant to the laws of the State of Florida, hereby states:

1. The name of the Partnership is The Whitmire Family Partners, Ltd.
2. The mailing address and address of the principal place of business of the Partnership are : 1146 Overbrook Drive, Orlando, Florida 32804.

3. The name and address of the agent for service of process on the Partnership are:

Carla DeLoach Bryant, Esquire  
1201 South Orlando Avenue, Suite 350  
Winter Park, Florida 32789

4. The name and business address of the sole General Partner is:

Betty R. Whitmire  
1146 Overbrook Drive  
Orlando, Florida 32804

5. The latest date upon which the Partnership shall dissolve is December 31, 2049.

The execution of this Certificate by the undersigned General Partner 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 sole General Partner of THE WHITMIRE FAMILY PARTNERS, LTD., this 26<sup>TH</sup> day of February 2002.

GENERAL PARTNER:

  
BETTY R. WHITMIRE

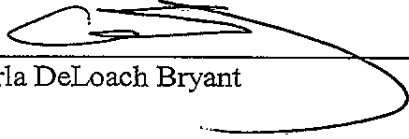
FILED  
02 APR 29 11 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING REGISTERED AGENT  
AND STREET ADDRESS FOR SERVICE OF PROCESS  
WITHIN FLORIDA

Pursuant to Fla. Stat. §48.061, THE WHITMIRE FAMILY PARTNERS, LTD., desiring to organize under the laws of the State of Florida, hereby designates Carla DeLoach Bryant, located at: 1201 South Orlando Avenue, Suite 350, Winter Park, FL 32789, as its registered agent to accept service of process within the State of Florida.

ACCEPTANCE OF DESIGNATION

The undersigned hereby accepts the above designation as registered agent to accept service of process for the above-named corporation, at the place designated above, and agrees to comply with the provisions of Fla. Stat. §48.061 relative to maintaining an office for the service of process.

  
\_\_\_\_\_  
Carla DeLoach Bryant

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority personally appeared BETTY R. WHITMIRE, as the sole general partner of TheWhitmire Family Partners, Ltd., a Florida limited partnership, who upon being duly sworn, certified as follows:

1. The amount of current and anticipated capital contributions made by the limited partners to the Partnership, in the aggregate, is \$ 0.

2. The additional capital contributions anticipated to be contributed by the limited partners is \$ 750,000.

Betty R. Whitmire  
BETTY R. WHITMIRE

STATE OF FLORIDA   )  
COUNTY OF ORANGE )

The foregoing instrument was acknowledged before me this 26<sup>TH</sup> day of February 2002 by Betty R. Whitmire, the sole general partner of The Whitmire Family Partners, Ltd., a Florida limited partnership. Said individual has produced a Florida driver's license as identification.

[Signature]  
(Signature of Notary Public)

C DeLoach  
(Print, Type or Stamp Commissioned Name of Notary Public)

Date of Expiration and Number:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 APR 29 PM 2:03

FILED

