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STUART E. GOLDBERG*

*Florida Bar Certified Wills, Trusts & Estates

CAROLYN D. OLIVE†

†Florida Bar Certified Tax Law

FILED
02 JUL 30 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 29, 2002

Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32301

By Hand Delivery

200006757592--6
-07/30/02--01018--020
***1810.00 ***1785.00

Re: COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P.

Dear Madam/Sir:

Enclosed for filing are an original and one copy each of the following documents:

AL

1. Statement of Qualification for Florida Limited Liability Limited Partnership;
2. Certificate of Limited Partnership;
3. Affidavit of Capital Contributions; and
4. Certificate of Designation of Registered Agent/Registered Office.

Also enclosed is our firm check in the amount of $1,810.00 for the following fees:

Limited Partnership filing fee	$ 1,750.00
LLLP Statement of Qualification fee	25.00
Registered Agent fee	35.00
Total	$ 1,810.00

Please return our document copies in the enclosed return envelope.

Thank you for your assistance in this matter. If you have any questions, please do not hesitate to call me.

Sincerely,

Carolyn D. Olive

Carolyn D. Olive

CDO/ldv
Enclosures

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Certificate of Limited Partnership of

COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P.

a Florida Limited Liability Limited Partnership

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TALLAHASSEE, FLORIDA

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The undersigned General Partner, desiring to form a limited liability limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986) as set forth in Chapter 620, Part I, of the Florida Statutes, hereby states the following:

1. The name of the Partnership is:

   COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P. (herein, the "Partnership").

2. The mailing address and principal place of business of the Partnership are:

   2808 Rabbit Hill Road
   Tallahassee, Florida 32308-0837

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

   Joan Wadsworth West
   2808 Rabbit Hill Road
   Tallahassee, Florida 32308-0837

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

   Joan Wadsworth West
   2808 Rabbit Hill Road
   Tallahassee, Florida 32308-0837

5. The latest date upon which the Partnership shall dissolve is December 31, 2075.

6. The effective date of this Certificate of Limited Partnership shall be upon filing.

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 General Partner of COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P. on this 25th day of July, 2002.

Joan Wadsworth West, as General Partner

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P., a Florida limited liability limited partnership (the "Partnership"), whose address is 2808 Rabbit Hill Road, Tallahassee, Florida 32308-0837, by and through its undersigned General Partner, certifies as follows:

1. The amount of initial capital contributions to the Partnership made by the initial Limited Partners is $ 100,000.\00.

2. Additional capital contributions are anticipated to be contributed by the Limited Partners to the Partnership in the amount of $ 1,900,000.\00.

3. The total amount of initial and anticipated capital contributions to be contributed to the Partnership is $ 2,000,000.\00.

FURTHER AFFIANT SAITH NOT.

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true, to the best of my knowledge and belief.

Joan Wadsworth West, as General Partner

STATE OF FLORIDA
COUNTY OF LEON

*The foregoing Affidavit was sworn to and subscribed before me this 25th day of July, 2002, by **Joan Wadsworth West** [(X) who is personally known to me; or (____) who has produced _____ as identification], as General Partner.*

Carolyn D. Olive
Signature of Notary Public

Notary Stamp/Seal:

CAROLYN D. OLIVE
MY COMMISSION # DD 093317
EXPIRES: March 3, 2006
Bonded Thru Notary Public Underwriters

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 620.105 AND 620.192, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY LIMITED PARTNERSHIP, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the limited liability limited partnership is:

COAST COTTAGE LIMITED PARTNERSHIP, L.L.L.P.

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2. The name and address of the registered agent and the address of the registered office are:

Joan Wadsworth West
2808 Rabbit Hill Road
Tallahassee, Florida 32308-0837

Joan Wadsworth West, as General Partner

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above-stated limited partnership 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.

Dated this 25th day of July, 2002.

Joan Wadsworth West
Registered Agent

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