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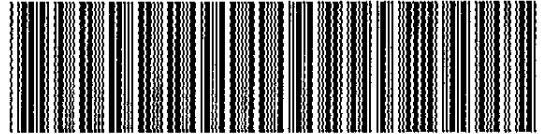
Certificates of Status

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DIVISION OF CORPORATION



ACCOUNT NO. : 072100000032

REFERENCE : 893936 7208815

AUTHORIZATION :

Patricia Pignatelli

COST LIMIT : \$ 1837.50

ORDER DATE : January 15, 2003

ORDER TIME : 11:19 AM

ORDER NO. : 893936-005

CUSTOMER NO: 7208815

CUSTOMER: Mark T. Tate, Esq
Mark T. Tate, P.a.

212 South Magnolia Ave

Tampa, FL 33606

DOMESTIC FILING

NAME: KINSMAN HOSPITALITY OF
CLEARWATER, LP

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
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE

Ken Detzner
Secretary of State

January 15, 2003

SUSIE KNIGHT
CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: KINSMAN HOSPITALITY OF CLEARWATER, LP
Ref. Number: W03000001350

We have received your document for KINSMAN HOSPITALITY OF CLEARWATER, LP and your check(s) totaling \$1837.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must add a limited partnership suffix to the name, such as LTD., LIMITED, or LIMITED PARTNERSHIP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 803A00002110

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**CERTIFICATE OF LIMITED PARTNERSHIP
KINSMAN HOSPITALITY OF CLEARWATER, LTD.**

In accordance with Florida Statute Section 620.108, this Certificate of Limited Partnership shall be filed with the Department of State of Florida, setting forth the following:

1. **Name**. The name of this limited Partnership shall be:

KINSMAN HOSPITALITY OF CLEARWATER, LTD.

2. **Registered Agent and Address**. The office and the name of the agent for service of process required to be maintained is as follows:

Mark T. Tate, Esquire
212 S. Magnolia Avenue
Tampa, FL 33606

3. **General Partner**. The name and business address of the general partner is:

Kinsman Properties Corporation
One Steinbrenner Drive
Tampa, FL 33614

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TAMPA, FL 33606
STATE OF FLORIDA

4. **Mailing Address**. The principal office and mailing address of the limited partnership is:

One Steinbrenner Drive
Tampa, FL 33614

5. **Termination Date**. The latest date upon which the limited partnership is to dissolve is December 31, 2053.

KINSMAN PROPERTIES CORPORATION

By: Harold Z. Steinbrenner
Harold Z. Steinbrenner, President

"General Partner"

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 14th of January, 2003, by
HAROLD Z. STEINBRENNER, as President of Kinsman Properties Corporation, General Partner,
who is personally known to me or who has produced _____ as identification.

Susan C. Moore

Print Name Susan C. Moore

"NOTARY PUBLIC"

My Commission Expires:



Susan C. Moore
Commission # CC 925890
Expires April 13, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

AFFIDAVIT OF GENERAL PARTNER

BEFORE ME, THE UNDERSIGNED AUTHORITY, personally appeared KINSMAN PROPERTIES CORPORATION, an Ohio corporation, known to me to be the general partner of KINSMAN HOSPITALITY OF CLEARWATER, LTD., a Florida limited partnership, who, before me first duly sworn, declare as follows:

1. The amount of capital initially contribute to the Partnership by the limited partner is approximately \$850,000.
2. The limited partner presently anticipates contributing additional funds to the Partnership and the total amount contributed and anticipated to be contributed will not exceed \$5,000,000.

KINSMAN PROPERTIES CORPORATION

By: [Signature]
Harold Z. Steinbrenner, President

"General Partner"


STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 14th day of January, 2003, by HAROLD Z. STEINBRENNER, who is personally known to me or who has produced _____ as identification.

[Signature]
Print Name Susan C. Moore

"NOTARY PUBLIC"

My Commission Expires:

 Susan C. Moore
Commission # CC 925890
Expires April 13, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of KINSMAN HOSPITALITY OF CLEARWATER, LTD., a Florida limited partnership, the undersigned accepts such appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes Section 608.415, and is herewith simultaneously designed as registered agent.

Executed this 19th day of January, 2003.



Mark T. Tate