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1.) Melvin O. Carter Family Limited Partner
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

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SPECIAL INSTRUCTIONS _____

CERTIFICATE OF LIMITED PARTNERSHIP
AND AFFIDAVIT OF CAPITAL CONTRIBUTIONS

OF

MELVIN O. CARTER FAMILY LIMITED PARTNERSHIP

The undersigned general partner files this Certificate of Limited Partnership of Melvin O. Carter Family Limited Partnership with the Florida Secretary of State pursuant to the requirements of Section 620.108 of the Florida Revised Uniform Limited Partnership Act (the "Act"), in order to form a Florida limited partnership.

.1. NAME. The name of the limited partnership is Melvin O. Carter Family Limited Partnership.

.2. PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THE OFFICE AT WHICH THE RECORDS REQUIRED TO BE MAINTAINED BY THE PARTNERSHIP UNDER THE ACT ARE KEPT IS: 1275 County Road 210 West, Jacksonville, Florida 32259.

.3. REGISTERED AGENT OF THE LIMITED PARTNERSHIP WILL BE: Melvin O. Carter, whose business address is 1275 County Road 210 West, Jacksonville, Florida 32259.

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.4. NAME AND ADDRESS OF THE GENERAL PARTNER OF THE PARTNERSHIP ARE AS FOLLOWS:

NAME	P02000008996	ADDRESS
MELVIN & SHERAN CARTER FAMILY CORPORATION		1275 County Road 210 West Jacksonville, Florida 32259

.5. THE EFFECTIVE DATE OF THIS LIMITED PARTNERSHIP SHALL BE when this Certificate is filed with the Secretary of State.

.6. THE LATEST DATE UPON WHICH THE LIMITED PARTNERSHIP IS TO BE DISSOLVED AND ITS AFFAIRS WOUND UP WILL BE: December 31, 2050.

.7. CONTRIBUTIONS AND ANTICIPATED CONTRIBUTIONS OF LIMITED PARTNERS: The limited partners will make initial capital contributions for their partnership interest of $ 400,000.00 and it is anticipated that the limited partners may make additional capital contributions of up to $ 150,000.00

.8. AFFIRMATION. Each general partner hereby acknowledges that pursuant to the Act:

.8.1 The execution of this certificate by the general partner constitutes an affirmation under penalties of perjury that the facts stated herein are true;

.8.2 The general partner accepts the liability imposed by the Act on the general partner for a false statement contained in this certificate; and

.8.3 If, after the execution of this certificate a general partner knows that any arrangement or other fact described in this certificate has changed, making the statement inaccurate in any material respect, the general partner will forthwith cause this certificate to be canceled or amended, or file a petition for its cancellation or amendment pursuant to the terms of the Act.

EXECUTED as of this 26 day of Feb, 2003.

GENERAL PARTNER:

MELVIN & SHERAN CARTER FAMILY CORPORATION

By: _____
MELVIN O. CARTER, President

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STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing was acknowledged before me this 26th day of February, 2003, by MELVIN O. CARTER, as President of MELVIN & SHERAN CARTER FAMILY CORPORATION, who is (X) personally known to me, or ( ) who produced a Florida Driver's License as identification, and who did take an oath and personally appeared before me.

SHIRLEY ANN DAVIS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD115065
EXPIRES 05/06/2006
BONDED THRU 1-888-NOTARY1

_____
NOTARY PUBLIC, State of Florida
Print Name: Shirley Ann Davis
My Commission Expires: 5/6/2006
Commission Number: DD 115065

CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA

In compliance with Sections 48.091 and 620.105 Florida Statutes, the following is submitted:

Melvin O. Carter Family Limited Partnership, desiring to organize or qualify under the laws of the State of Florida hereby designates Melvin O. Carter as its registered Agent to accept service of process within the State of Florida and the address of its registered office shall be 1275 County Road 210 West, Jacksonville, Florida 32259.

DATED this 26 day of Feb, 2003.

GENERAL PARTNER:

MELVIN & SHERAN CARTER FAMILY CORPORATION

By: _____
MELVIN O. CARTER

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Having been named as registered agent 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 statute 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 26 day of Feb., 2003.

_____
MELVIN O. CARTER

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of MELVIN O. CARTER FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership, executed this constituting all of the affidavit filed pursuant to section 620.112, Florida Statutes.

The total amount of the capital contributions of the limited partners is: $ 400,000.00.
The total amount contributed and anticipated to be contributed by the limited partners at this time totals $ 550,000.00.
This 26 day of feb, 2003.

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FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

MELVIN & SHERAN CARTER FAMILY CORPORATION

By: _____
MELVIN O. CARTER, President

Fees:
$7 per $1000, based on additional contributions
Minimum $ 52.50
Maximum $1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS20(1/00)