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(City/State/Zip/Phone #)

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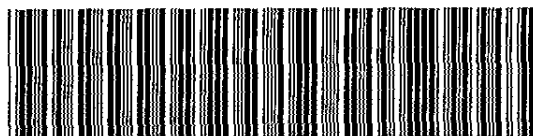
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DIVISION OF CORPORATION

03 JUL 24 PM 1:33

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03 JUL 24 PM 3:34
TALLAHASSEE, FLORIDA

Pennington
Moore
Wilkinson
Bell &
Dunbar P.A.
ATTORNEYS AT LAW
www.penningtonlaw.com

July 24, 2003

VIA HAND-DELIVERY

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Regional Investment Fund, LTD

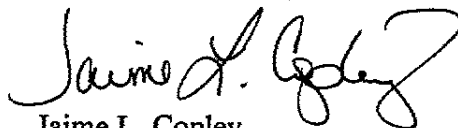
Dear Sir or Madam:

Please find enclosed for filing with your office the original Certificate of Limited Partnership and Affidavit of Capital Contributions of Regional Investment Fund, LTD. Also enclosed is our firm's check in the amount of Eighty-Seven Dollars and Fifty Cents (\$87.50) for payment of the required fees.

If you have any questions, please contact either Mark Haney or me.

Sincerely,

PENNINGTON, MOORE, WILKINSON,
BELL & DUNBAR, P.A.



Jaime L. Copley,
Paralegal to Mark T. Haney

Enclosures

FILED
03 JUL 24 PM 3:34
STATE
TALLAHASSEE, FLORIDA

File 1st

AFFIDAVIT

LEON COUNTY,

TALLAHASSEE, FLORIDA

BEFORE ME, the undersigned authority, personally appeared (Affiant) who being by me first duly sworn, deposes and states:

1. Affiant is the General Partner of Regional Investment Fund, LTD (the "Company").
2. Affiant has, in his capacity as General Partner of Company, did, on June 27, 2003, approve and file a certificate of cancellation of the Company (the "Certificate of Cancellation"), a copy of which is attached as Exhibit A.
3. Affiant affirms that said Company releases any and all claims to the name "Regional Investment Fund, LTD" and that Affiant, as the General Partner of the Company, will not revoke the Certificate of Cancellation.
4. Under penalty of perjury, Affiant, by his signature below, does hereby affirm that he has read the above in its entirety and that all facts and statements contained herein are true and correct in all respects.

AFFIANT


ROBERT R. DEISON

The foregoing instrument was sworn to before me this 7 day of July, 2003, by Robert R. Deison, who is personally known to me, or who provided a N/A as identification, and who did take an oath.


Notary Public



Linda J. Campbell
MY COMMISSION # CC951022 EXPIRES
July 16, 2004
BONDED THRU TROY FAIR INSURANCE, INC.

My Commission Expires:

CERTIFICATE OF LIMITED PARTNERSHIP AND
AFFIDAVIT OF CAPITAL CONTRIBUTIONS OF
REGIONAL INVESTMENT FUND, LTD.

This Certificate of Limited Partnership is submitted in compliance with Section 620.108, Florida Statutes (2003)

1. The name of the limited partnership is REGIONAL INVESTMENT FUND, LTD.
2. The mailing address of the limited liability limited partnership is as follows:

c/o Robert R. Deison, Managing General Partner
3500 Financial Plaza, Suite 201
Tallahassee, FL 32312
3. The address of the office and the name and address of the agent for service of process is as follows:

c/o Robert R. Deison
3500 Financial Plaza, Suite 201
Tallahassee, FL 32312
4. The name and the business address of the general partner of the limited partnership is as follows:

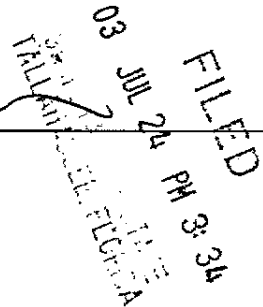
Robert R. Deison
3500 Financial Plaza, Suite 201
Tallahassee, FL 32312
5. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2053.
6. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$100.00.

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Executed this 7 day of July, 2003.



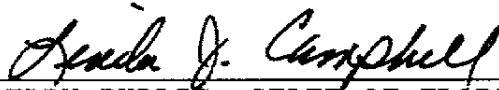
ROBERT R. DEISON
General Partner



STATE OF FLORIDA,

COUNTY OF LEON.

The foregoing instrument was acknowledged before me this 7 day of July, 2003, by ROBERT R. DEISON, who is personally known to me or who has produced N/A as identification.



NOTARY PUBLIC, STATE OF FLORIDA



Linda J. Campbell
MY COMMISSION # CC951022 EXPIRES
July 16, 2004

Print, Type or Stamp Name of Notary

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of Section 620.105, Florida Statutes, the undersigned limited partnership submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Partnership is: Regional Investment Fund, LTD.
2. The name and the Florida street address of the registered agent and office are: Robert R. Deison, 3500 Financial Plaza, Suite 201, Tallahassee, FL 32312.

Regional Investment Fund, LTD

By: _____

ROBERT R. DEISON,
GENERAL PARTNER

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY 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 AS PROVIDED FOR IN CHAPTER 608, F.S.

SIGNATURE: _____

ROBERT R. DEISON

DATE: _____

July 7, 2003