

Certificate of Limited Partnership

**A03000001426
FILED
October 01, 2003
Sec. Of State**

Name of Limited Partnership:

ALE FAMILY LIMITED PARTNERSHIP

Business Address of Limited Partnership:

2802 N.W. 60TH TERRACE
SUITE 259
SUNRISE, FL. US 33313

Mailing Address of Limited Partnership:

2802 N.W. 60TH TERRACE
SUITE 259
SUNRISE, FL. US 33313

The name and Florida street address of the registered agent is:

JAMES ALE
2802 N.W. 60TH TERRACE
SUITE 259
SUNRISE, FL. 33313

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: JAMES ALE

The latest date upon which the Limited Partnership is to be dissolved is:

10/01/2099

The name and address of all general partners are:

Title: G
SERVICE MANAGEMENT GROUP OF FLORIDA, INC.
2802 N.W. 60TH TERRACE SUITE 259
SUNRISE, FL. 33313 US

The effective date for this Limited Partnership shall be:

10/01/2003

**Affidavit of Capital Contributions
For Florida Limited Partnership**

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The undersigned constituting all of the general partners of:
ALE FAMILY LIMITED PARTNERSHIP

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is:
0.00

The total amount contributed and anticipated to be contributed by the
limited partners at this time totals:
1,000.00

Signed this First day of October, 2003

Under the penalties of perjury I (we) declare the I (we) have read the foregoing
and know the contents thereof and that the facts stated herein are true and correct.

General Partner Signature: JAMES ALE, PRESIDENT OF GP