

Certificate of Limited Partnership

**A03000001749
FILED
December 16, 2003
Sec. Of State**

Name of Limited Partnership:

D.T.T.P. FAMILY LIMITED PARTNERSHIP, LTD.

Business Address of Limited Partnership:

524 STOCKTON STREET
JACKSONVILLE, FL. 32204

Mailing Address of Limited Partnership:

524 STOCKTON STREET
JACKSONVILLE, FL. 32204

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

KATHLEEN H COLD
ONE INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL. 32202

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

Registered Agent Signature: KATHLEEN H. COLD

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

12-31-2050

The name and address of all general partners are:

Title: G
D.T.T.P. INVESTMENTS, INC.
524 STOCKTON STREET
JACKSONVILLE, FL. 32204

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

**A03000001749
FILED
December 16, 2003
Sec. Of State**

The undersigned constituting all of the general partners of:
D.T.T.P. FAMILY LIMITED PARTNERSHIP, LTD.

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is:
6,000.00

The total amount contributed and anticipated to be contributed by the
limited partners at this time totals:
6,000.00

Signed this Sixteenth day of December, 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: WILLIAM W. GAY