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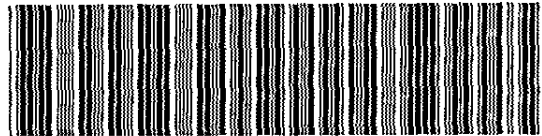
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

J. Greg Ruthven Family
Limited Partnership

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☐ Fictitious Search _____
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☐ Courier _____

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

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**CERTIFICATE OF LIMITED
PARTNERSHIP OF
J. GREG RUTHVEN FAMILY LIMITED PARTNERSHIP**

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TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited partnership under the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as set forth in Section 620.101 seq. of the Florida Statutes, do hereby certify to the following:

1. The name of the limited partnership is "**J. GREG RUTHVEN FAMILY LIMITED PARTNERSHIP**".

2. The address of the office of the limited partnership required to be maintained by Section 620.105(1), Florida Statutes, is as follows:

1416 Briarwood Lane
Lakeland, Florida 33803

3. The name and street address of the registered agent, for service of process on the limited partnership, required to be maintained by Section 620.105(2), Florida Statutes, are as follows:

J. Greg Ruthven
1416 Briarwood Lane
Lakeland, Florida 33803

4. The name and business address of the general partner is:

J. Greg Ruthven
1416 Briarwood Lane
Lakeland, Florida 33803

5. The mailing address for the limited partnership is as follows:

1416 Briarwood Lane
Lakeland, Florida 33803

6. The latest date upon which the limited partnership is to dissolve is June 30, 2025.

7. An affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners, as required by Section 620.108, Florida Statutes, is attached to this certificate.

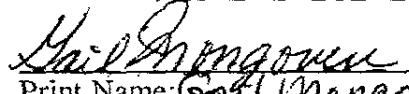
IN WITNESS WHEREOF, the undersigned has executed this certificate as of the 17
day of Jan 2004.

Signed, sealed and delivered
in the presence of:

GENERAL PARTNER:


Print Name: DANIEL G. KELSO


GREG RUTHVEN


Print Name: Gail Mangover

**ACCEPTANCE OF
REGISTERED AGENT FOR
J. GREG RUTHVEN FAMILY LIMITED PARTNERSHIP**

Having been named as registered agent to accept service of process upon the above named partnership, at the address designated in the certificate of limited partnership, 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 state that I am a resident of the State of Florida and I am familiar with, and accept, the obligations of my position as registered agent.

Dated: Feb 19, 2004


J. GREG RUTHVEN

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
TO J. GREG RUTHVEN FAMILY LIMITED PARTNERSHIP**

The undersigned affiant, J. Greg Ruthven, as the general partner of J. Greg Ruthven Family Limited Partnership, whose address is 1416 Briarwood Lane, Lakeland, Florida 33803, after being first duly sworn, says upon oath:

1. The undersigned is the only general partner of J. Greg Ruthven Family Limited Partnership, a Florida limited partnership.
2. The total amount of the capital contributions of the limited partners and the amount of capital anticipated to be contributed by all of the limited partners of the partnership is \$99,000.00. The capital contributed to the partnership may be either cash or property, real or personal, tangible or intangible.
3. This affidavit is given for the purpose of complying with the provisions of Section 620.108 of the Florida Statutes.

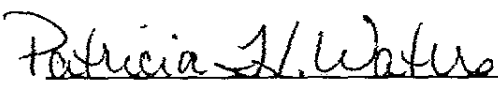
FURTHER, AFFIANT SAYETH NOT.


J. GREG RUTHVEN

**STATE OF FLORIDA
COUNTY OF POLK**

THE FOREGOING WAS ACKNOWLEDGED BEFORE ME, on this 21st day of January, 2004, by J. Greg Ruthven, who is the general partner of J. Greg Ruthven Family Limited Partnership, a Florida limited partnership, who [] is personally known to me or who [] has produced a drivers license as identification.

(SEAL)


Notary Public

My Commission Expires:

PATRICIA H. WATERS
Notary Public, State of Florida
My comm. exp. Feb. 13, 2004
Comm. No. CC910224