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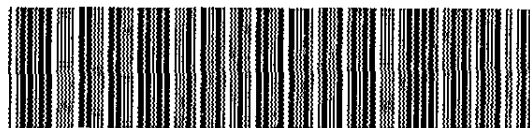
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE MEEKER FAMILY LIMITED PARTNERSHIP

The enclosed Certificate of Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

I. Michael Tucker, Esquire

Law Office of I. Michael Tucker, P.L.C.

SunTrust Bank Building

498 Palm Springs Drive, Suite 100

Altamonte Springs, Florida 32701

For further information concerning this matter, please call:

I. Michael Tucker, Esquire at 407-977-8836

Mailing Address

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 11, 2004

LAW OFFICE OF I. MICHAEL TUCKER, P.L.C.
SUNTRUST BANK BUILDING
498 PALM SPRINGS DRIVE, SUITE 100
ALTAMONTE SPRINGS, FL 32701

SUBJECT: THE MEEKER FAMILY LIMITED PARTNERSHIP
Ref. Number: W04000018116

We have received your document for THE MEEKER FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 204A00032882

CERTIFICATE OF LIMITED PARTNERSHIP

1. THE MEEKER FAMILY LIMITED PARTNERSHIP
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 145 SOUTH ORLANDO AVENUE #8, P.M.B. 305, MAITLAND, FL 32751
(Business address of Limited Partnership)
3. I. MICHAEL TUCKER, ESQUIRE
(Name of Registered Agent for Service of Process)
4. 498 PALM SPRINGS DRIVE, SUITE 100 ALTAMONTE SPRINGS, FL 32701
(Florida street address for Registered Agent)
5. *I. Michael Tucker*
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 145 SOUTH ORLANDO AVENUE #8, P.M.B. 305, MAITLAND, FL 32751
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/2050
8. Name(s) of general partner(s): _____ Street address: _____

STEVEN F. MEEKER

145 South Orlando Avenue #8

GAIL A. MEEKER

P.M.B. 305

Maitland, Florida 32751

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

Signed this 14th day of April, 2004

Signature of all general partners:

Steven F. Meeker
General Partner

Gail A. Meeker
General Partner

General Partner

General Partner

General Partner

General Partner

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of THE MEEKER FAMILY
LIMITED PARTNERSHIP,

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ -0-.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ -0-.

Signed this 14th day of April, 2004.

FURTHER AFFIANT SAYETH NOT.

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

Steven F. Meeker
General Partner

David A. Meeker
General Partner

General Partner

General Partner

General Partner

General Partner