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Division of Corporations

001/005

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DIVISION OF CORPORATION

FLORIDA LIMITED PARTNERSHIP

Shoults Family Partnership, Ltd.

Certificate of Status	0
Certified Copy	1
Page Count	045
Estimated Charge	\$430.50

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TK
\$49,000.00

12/30/04

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**CERTIFICATE OF LIMITED PARTNERSHIP OF
SHOULTS FAMILY PARTNERSHIP, LTD.**

The undersigned, pursuant to the provisions of Chapter 620, Florida Statutes, files the following Certificate of Limited Partnership evidencing the formation of that limited partnership known as SHOULTS FAMILY PARTNERSHIP, LTD. under that partnership agreement executed of date even herewith.

I. NAME AND PRINCIPAL OFFICE

The partnership shall be conducted under the name of SHOULTS FAMILY PARTNERSHIP, LTD. The principal office and mailing address of the limited partnership shall be 925 Bambi Drive, Destin, Florida 32541.

II. REGISTERED OFFICE, REGISTERED AGENT

The address of the initial registered office of this partnership in the State of Florida shall be 125 W. Romana Street, Suite 800, Pensacola, Florida 32502, and the name of the registered agent of this partnership at that address is Robert D. Hart, Jr.

III. NAME AND ADDRESS OF GENERAL PARTNER

(1) General Partner. The name and address of the general partner of this partnership are:

Shoults, LLC
925 Bambi Drive
Destin, FL 32541

LOS - 412

V. TERM OF LIMITED PARTNERSHIP

The term for which the partnership is to exist begins upon the date this Certificate of Limited Partnership is filed with the Secretary of State of the State of Florida, and shall continue until December 31, 2050, unless sooner terminated by law, the filing of a Certificate of Cancellation or under the provisions of the Agreement of Limited Partnership.

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IN WITNESS WHEREOF, the General Partner hereto has executed this Certificate of Limited Partnership on the date hereinafter set forth.

WITNESS:

Lisa A. Watson

GENERAL PARTNER:
SHOULTS, LLC

By:

Robert D. Hart, Jr.

Robert D. Hart, Jr., Authorized Representative of Member

Date: 30th day of Dec., 2004

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SECRETARY OF THE
TALLAHASSEE COUNTY

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for SHOULTS FAMILY PARTNERSHIP, LTD., a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, the undersigned, on behalf of the Partnership, hereby agrees to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:



ROBERT D. HART, JR.

2004 DEC 30 P 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STATE OF FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

COUNTY OF ESCAMBIA

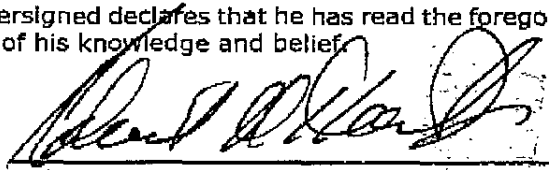
BEFORE ME, the undersigned, Robert D. Hart, Jr., in his capacity as an Authorized Representative of a Member of SHOULTS, LLC, a Florida Limited Liability Company and General Partner of SHOULTS FAMILY PARTNERSHIP, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership," who upon being duly sworn, certified as follows:

1. The total amount of capital contributions to the Partnership made by the limited partners is \$49,000.00.
2. The amount of additional capital contributions anticipated to be contributed by each limited partner are as follows:

NO ADDITIONAL CAPITAL CONTRIBUTIONS ANTICIPATED AT THIS TIME.


FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, the undersigned declares that he has read the foregoing and that the facts alleged are true to the best of his knowledge and belief.


Robert D. Hart, Jr., Authorized Representative,
of a Member of Shoults, LLC, a Florida limited liability
company, General Partner

Date: DEC 30, 2004

SWORN TO AND SUBSCRIBED BEFORE ME this 30th day of December, 2004, by Robert D. Hart, Jr., authorized representative of a Member of Shoults, LLC, a Florida limited liability company and General Partner of Shoults Family Partnership, Ltd., a Florida limited partnership, who (☒) is personally known to me, or (☐) has produced as identification.


[Signature of Notary Public]
LISA A. WATSON
Notary Public-State of FL
Comm. Exp. Sept. 27, 2006
Comm. No. DD 151922

[Print, Type, or Stamp Name of Notary Public]

[NOTARIAL SEAL]

Commission Number: _____
My Commission Expires: _____

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