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(((H050001055943)))

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FLORIDA LIMITED PARTNERSHIP

Carter-Vineland Pointe, LLLP

Certificate of Status	0
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Estimated Charge	\$1,837.50

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Electronic Filing Menu.

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- ARTICLES OF INCORPORATION FOR THE GENERAL PARTNER HAVE BEEN SUBMITTED SIMULTANEOUSLY UNDER FAX AUDIT NUMBER HO5000105563.
- THE STATEMENT OF QUALIFICATION FOR THIS PARTNERSHIP AS A FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP WILL FOLLOW AS SOON AS A DOCUMENT NUMBER IS ASSIGNED TO THE PARTNERSHIP.

DEAN MEAD ORLANDO

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FILED

CERTIFICATE OF LIMITED PARTNERSHIP OF CARTER-VINELAND POINTE, LLLP

2165 MP9 27 A 9: 37

SECRETARY OF STATE TALLAMASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited liability limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.205 of the Florida Statutes, hereby states the following:

- 1. The name of the Partnership is Carter-Vineland Pointe, LLLP.
- 2. The address of the office of the Partnership as referred to in Section 620.108, Florida Statutes, is 3333 South Orange Avenue, Suite 200, Orlando, Florida 32806-8500.
- 3. The name and address of the agent for service of process on the Partnership are Daryl M. Carter, 3333 South Orange Avenue, Suite 200, Orlando, Florida 32806-8500.
 - 4. The name and business address of the General Partner are:

Name

<u>Address</u>

Carter-Vineland Management, Inc. Po5-le 1940

3333 South Orange Avenue, Suite 200 Orlando, Florida 32806-8500

- 5. The mailing address for the Partnership is 3333 South Orange Avenue, Suite 200, Orlando, Florida 32806-8500.
- 6. The latest date upon which the Partnership shall dissolve is December 31, 2055.
- 7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by the General Partner.

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

CARTER-VINELAND MANAGEMENT, INC.,

General Partner

Daryl M. Carter, President

Date: April 26, 2005

04/27/2005 11:46 FAX 407 4231831

DEAN MEAD ORLANDO

(((H05000105594 3)))

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGAIN

Having been named as registered agent for the above-named Partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity, and I further agree to comply with provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

Date: April 26 2005

DEAN MEAD ORLANDO

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FILED

STATE OF FLORIDA

2005 MPR 27 A 9:37

COUNTY OF ORANGE

SALARASSEL, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared DARYL M. CARTER, as President of CARTER-VINELAND MANAGEMENT, INC., the sole General Partner of CARTER-VINELAND POINTE, LLLP, a Florida limited liability limited partnership (the "Partnership"), of Orange County, Florida, who upon being duly sworn, certified as follows:

- The amount of the capital contributions to the Partnership made by the limited partners is \$4,000,000.00.
- The amount of additional capital contributions anticipated to be contributed by the limited partners is \$ -0-.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

CARTER-VINELAND MANAGEMENT, INC.,

General Partner-

Daryl M. Carter, President

Sworn to and subscribed before me this 26 ± 6 day of April, 2005, by DARYL M. CARTER, as President of CARTER-VINELAND MANAGEMENT, INC., the sole General Partner on behalf of CARTER-YINELAND POINTE, LLLP, a Florida limited liability limited partnership. He (check one) Dis personally known to me, I produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or \square produced other identification, to wit:

Print Name:

Notary Public - State of Florida

Commission No.:

My Commission Expires:

(NQTARY'S STAMP OR SEAL)

PAMELA LEE WRAY stary Public - State of Florida Ay Commission Expires Jul 22, 2006 Commission # DD127824