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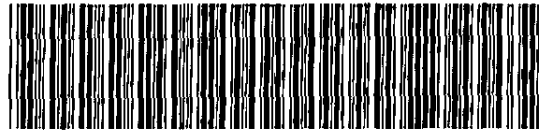
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STATE RELATIONS
TALLAHASSEE, FLORIDA

Capitol Services, Inc.

2750 Old St. Augustine Rd., N-145

Tallahassee, FL 32301

(850) 878-4734

Kathi or Brent

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TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. The Palms Associates, LTD
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 8/9/05 ☐ Certified Copy

☐ Mail Out ☐ Will wait ☒ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP
OF
THE ARCADIA PALMS ASSOCIATES, LTD.

FILED
05 AUG 10 PM 5:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the authority of Section 620.108, Florida Statutes, the undersigned, constituting the general partner of The Arcadia Palms Associates, Ltd. (the "Partnership"), hereby submits the following in connection with the formation of the Partnership:

1. The name of the Partnership shall be The Arcadia Palms Associates, Ltd. (the "Partnership").

2. The address of the initial office where records shall be kept shall be 7 Booker T. Washington Road, Arcadia, Florida 34266. The name and address of the initial registered agent for service of process is Sandra Sanders P.A., 203 West Oak Street, Arcadia, Florida 34266.

3. The name and initial business address of the General Partners is:

THE PALMS ASSOCIATES GP, LLC, a Florida limited liability company
7 Booker T. Washington Road
Arcadia, Florida 34266

L05000678644

4. The initial mailing address of the limited partnership is 7 Booker T. Washington Road, Arcadia, Florida 34266.

5. The latest date upon which the Partnership is to dissolve shall be December 31, 2065.

This Certificate has been executed by the undersigned as of the 10th day of August 2005.

GENERAL PARTNER:

THE PALMS ASSOCIATES GP, LLC, a Florida limited liability company

By: Arcadia Housing Authority, a non-profit corporate body and politic pursuant to Chapter 421, Florida Statutes, its managing member

By: Christine Engels
Name: Christine Engels
Title: Executive Director

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting the sole general partner of The Arcadia Palms Associates, Ltd. and being duly sworn do hereby set forth the following for the purpose of accompanying the filing of the Certificate of Limited Partnership of The Arcadia Palms Associates, Ltd. with the Florida Department of State, as required by Section 620.108, Florida Statutes:

The amount of the capital contributions of the limited partners as of the date hereof is \$50.00 and no further capital contributions from the limited partners are anticipated at this time.

This Affidavit is executed and sworn to by:

GENERAL PARTNER:

THE PALMS ASSOCIATES GP, LLC, a Florida limited liability company

By: Arcadia Housing Authority, a non-profit corporate body and politic pursuant to Chapter 421, Florida Statutes, its managing member

By: Christine Engels
Name: Christine Engels
Title: Executive Director

Dated this 10th day of August, 2005.

STATE OF FLORIDA
COUNTY OF Desoto

The foregoing instrument was acknowledged before me this 10th day of August, 2005, by Christine Engels, as Executive Director of the Arcadia Housing Authority, the managing member of The Palms Associates GP, LLC, a Florida limited liability company, as general partner of The Palms Associates, Ltd., a Florida limited partnership. He/She is personally known to me or has produced _____ as identification and who did/did not take an oath.



Shannon L. Kelley
My Commission DD081283
Expires February 11, 2006

Shannon L. Kelley
(Signature of Notary Public)

Shannon L. Kelley
(Typed name of Notary Public)

Notary Public, State of Florida

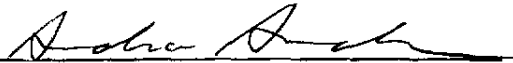
Commission No. _____

My commission expires: _____

ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been designated as the Registered Agent for The Arcadia Palms Associates, Ltd., the undersigned hereby accepts the designation and agrees to act as the Registered Agent of said limited partnership and states that it is familiar with and accepts its statutory obligations as such, including those obligations contained in §620.192, Florida Statutes.

SANDRA SANDERS P.A.

By: 

Dated this 10th day of August, 2005.