

## **Certificate of Limited Partnership**

**A05000001770**  
**FILED**  
**September 19, 2005**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

SIXTY SIX-THIRTY THREE LIMITED PARTNERSHIP

Business Address of Limited Partnership:

122 15TH AVENUE N  
UNIT #1  
JACKSONVILLE BEACH, FL. 32250

Mailing Address of Limited Partnership:

122 15TH AVENUE N  
UNIT #1  
JACKSONVILLE BEACH, FL. 32250

The name and Florida street address of the registered agent is:

MCCANN MANAGEMENT CORP  
135 2ND AVENUE NORTH  
SUITE 3  
JACKSONVILLE BEACH, FL. 32250

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: MICHAEL MCCANN

The latest date upon which the Limited Partnership is to be dissolved is:

PERPETUAL

The name and address of all general partners are:

Title: G  
MCCANN MANAGEMENT CORP  
135 2ND AVENUE NORTH  
JACKSONVILLE BEACH, FL. 32250

# **Affidavit of Capital Contributions For Florida Limited Partnership**

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The undersigned constituting all of the general partners of:  
SIXTY SIX-THIRTY THREE LIMITED PARTNERSHIP

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is:  
1,000.00

The total amount contributed and anticipated to be contributed by the  
limited partners at this time totals:  
1,000.00

Signed this Nineteenth day of September, 2005

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

General Partner Signature: MICHAEL MCCANN