

## **Certificate of Limited Partnership**

**A05000001771**  
**FILED**  
**September 20, 2005**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

ANOTHER WOMAN'S TREASURE, LIMITED PARTNERSHIP

Business Address of Limited Partnership:

50 SAN MARCO AVE.  
ST. AUGUSTINE, FL. US 32095

Mailing Address of Limited Partnership:

PO BOX 770  
ST. AUGUSTINE, FL. US 32085

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

QUINETTA Y LEWIS  
1024 W. KING ST.  
ST. AUGUSTINE, FL. 32095

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

Registered Agent Signature: QUINETTA Y. LEWIS

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

01/01/2010

The name and address of all general partners are:

Title: G  
JOLENE C ARMOND  
4 PINE HALL PLACE  
PALM COAST, FL. 32164 US

The effective date for this Limited Partnership shall be:

09/20/2005

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

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The undersigned constituting all of the general partners of:  
ANOTHER WOMAN'S TREASURE, LIMITED PARTNERSHIP

a Florida Limited Partnership, certify:

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

0.00

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

0.00

Signed this Twentieth 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: JOLENE C ARMOND