Certificate of Limited Partnership

A06000000017
FILED
January 04, 2006
Sec. Of State
gharvey

Name of Limited Partnership:

MONTECITO WALDEN LIMITED PARTNERSHIP

Street Address of Limited Partnership:

7785 BAYMEADOWS WAY
SUITE 200
JACKSONVILLE, FL. 32256

Mailing Address of Limited Partnership:

7785 BAYMEADOWS WAY
SUITE 200
JACKSONVILLE, FL. 32256

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

DOUGLAS R MAXWELL
10739 DEERWOOD PARK BOULEVARD
SUITE 200A
JACKSONVILLE, FL. 32256

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

Registered Agent Signature: DOUGLAS R. MAXWELL

The name and address of all general partners are:

Title: G
MONTECITO WALDEN MANAGEMENT, LLC
10739 DEERWOOD PARK BLVD, SUITE 200A
JACKSONVILLE, FL. 32256

Signed this Fourth day of January, 2006

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: DOUGLAS R. MAXWELL, VP & ASST SECTY