

# **Certificate of Limited Partnership**

**A06000000249**  
**FILED**  
**February 14, 2006**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

INDEPENDENCE COMMONS, LP

Street Address of Limited Partnership:

24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL. 34134

Mailing Address of Limited Partnership:

24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL. 34134

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

DON E ACKERMAN  
24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL. 34134

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

Registered Agent Signature: DON E. ACKERMAN

The name and address of all general partners are:

Title: G  
INDEPENDENCE COMMONS, INC.  
24311 WALDEN CENTER DRIVE, SUITE 300  
BONITA SPRINGS, FL. 34134

Signed this Fourteenth day of February, 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: DON E. ACKERMAN