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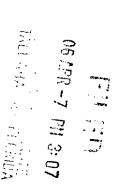
(Requestor's Name)		
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Cover Letter

TO: Registration Section

Division of Corporation

SUBJECT: The Robert Boozer Family Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

James W. Bailey, Jr.
Southern Financial Services
56 Central Avenue Suite 201
Asheville, NC 28801

For further information concerning this matter, please call:

James W. Bailey, Jr. at (828) 251-5896

Enclosed is a check for \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP

1. Name of Limited Partnership: The Robert Boozer Family Limited Partnership

2. Address of initial designated office:

13939 Mandarin Oaks Lane Jacksonville, FL 32223

3. Name of Registered Agent:

Robert G. Boozer

4. Florida Street Address:

13939 Mandarin Oaks Lane Jacksonville, FL 32223

5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Robert G. Booze

6. Mailing address:

13939 Mandarin Oaks Lane Jacksonville, FL 32223

- 7. The Limited Partnership does not elect to be a limited liability limited partnership.
- 8. The name and business address of each general partner:

Robert G. Boozer

13939 Mandarin Oaks Lane Jacksonville, FL 32223

9. Effective date: This shall be effective upon filing.

Signed this 14th day of March, 2006

Signature of each general partner:

Robert G. Boozer

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)