

## **Certificate of Limited Partnership**

**A06000000808**  
**FILED**  
**June 22, 2006**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

MONTECITO CARTERSVILLE MOB 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 BLVD  
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 CARTERSVILLE MOB MANAGEMENT, LLC  
7785 BAYMEADOWS WAY, SUITE 200  
JACKSONVILLE, FL. 32256

Signed this Twenty Second day of June, 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 AND ASST SECTY