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Division of Corporations Public Access System

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FLORIDA/FOREIGN LP/LLP

LGC INVESTMENT, LLLP

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Page Count	03
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April 27, 2007

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PLORIDA DEPARTMENT OF STATE
Division of Corporations

SUBJECT: LGC INVESTMENT, LLLP

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP OF

LGC HOLDINGS, LLLP

The undersigned, in forming a Florida limited liability limited partnership under the Florida Revised Uniform Limited Partnership Act of 2005, as amended, Chapter 620 of the Florida Statutes, hereby adopts the following Certificate of Limited Partnership:

- 1. The name of the limited liability limited partnership is LGC HOLDINGS, LLLP (hereinafter, the "Partnership").
- 2. The mailing and principal address of the Partnership is 65 Lencadendra Drive, Coral Gables, FL 33156.
- 3. The name and street address of the initial registered agent of the Partnership are CORPORATION SERVICE COMPANY, 1201 Hays Street, Tallahassee, Florida 32301.
- The name and business address of the general partner of the Partnership are LGC INVESTMENT. LLC, 65 Leucadendra Drive, Coral Gables, FL 33156.
 - The Partnership is a limited liability limited partnership.

Under penalties of perjury the undersigned has read the foregoing and know the contents thereof and that the facts herein are true and correct.

Signed this 18 day of April , 2007.

GENERAL PARTNER:

LGC INVESTMENT, LLC

By:

LAURA GENE COULTER JONES, Manager

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

Having been named as registered agent and to accept service of process for LGC HOLDINGS. LILLP at the place designated in paragraph 3 of the Certificate of Limited Partnership, 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 relating to the proper and complete performance of my duries, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 620, F.S.

CORPORATION SERVICE COMPANY

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SECHETANT OF STATE
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