

# **Certificate of Limited Partnership**

**A07000000648**  
**FILED**  
**May 01, 2007**  
**Sec. Of State**  
gharvey

Name of Limited Partnership:

LIPSCOMB LAW, LP

Street Address of Limited Partnership:

1407 SW 158TH AVE.  
PEMBROKE PINES, FL. 33027

Mailing Address of Limited Partnership:

1407 SW 158TH AVE.  
PEMBROKE PINES, FL. 33027

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

MICHAEL K LIPSCOMB  
1407 SW 158TH AVE.  
PEMBROKE PINES, FL. 33027

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

Registered Agent Signature: MICHAEL KEITH LIPSCOMB

The name and address of all general partners are:

Title: G  
MICHAEL K LIPSCOMB  
1407 SW 158TH AVE.  
PEMBROKE PINES, FL. 33027

The effective date for this Limited Partnership shall be:

05/01/2007

Signed this First day of May, 2007

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: MICHAEL KEITH LIPSCOMB