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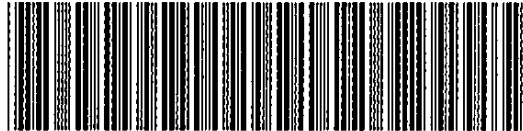
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RECEIVED
07 JUL 25 AM 10:43
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 025187 4326591

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 25, 2007

ORDER TIME : 10:18 AM

ORDER NO. : 025187-005

CUSTOMER NO: 4326591

FILED
07 JUL 25 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: LOWMAN FAMILY, LLLP

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: _____

CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP
LOWMAN FAMILY, LLLP

In accordance with Florida Statutes, Section 620.108, this Certificate of Limited Partnership shall be filed with the Department of State of Florida, setting forth the following:

1. **Name**. The name of this limited liability limited partnership shall be "Lowman Family, LLLP".

2. **Registered Agent and Address**. The office and the name of the agent for service of process required to be maintained is as follows:

Matthew E. Lowman
13201 Old Crystal River Road
Brooksville, Florida 34601

3. **General Partners**. The name and business address of each general partner is:

Matthew E. Lowman
13201 Old Crystal River Road
Brooksville, Florida 34601

Beverly Lowman
13201 Old Crystal River Road
Brooksville, Florida 34601

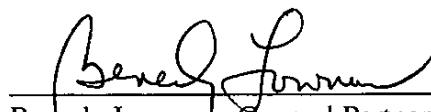
4. **Mailing Address**. The principal office and mailing address of the limited partnership is:

13201 Old Crystal River Road
Brooksville, Florida 34601

5. **Limited Liability Limited Partnership**. Lowman Family, LLLP is formed as a limited liability limited partnership under Chapter 620, of the Florida Revised Uniform Limited Partnership Act of 2005.

Signed this 28th day of June, 2007.


Matthew E. Lowman, Registered Agent
and General Partner


Beverly Lowman, General Partner