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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
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FLORIDA/FOREIGN LP/LLLP

SP One, Ltd.

Certificate of Status	0
Certified Copy	1
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**CERTIFICATE OF LIMITED PARTNERSHIP
OF
SP ONE, LTD.**

Pursuant to the Florida Revised Uniform Limited Partnership Act of 2005, the undersigned, being the sole General Partner of SP One, Ltd., a Florida limited partnership (the "Partnership"), hereby executes and submits for filing with the Florida Department of State this Certificate of Limited Partnership, to read as follows:

1. The name of the Limited Partnership is:

SP ONE, LTD.

2. The mailing address and street address of the Partnership currently is:

1205 West Swann Avenue
Tampa, FL 33606

3. The name and address of the agent for service of process on Partnership are:

David A. Messinger
2200 Mastum Tower
150 West Flagler Street
Miami, Florida 33130

4. The name and address of the General Partner of the Partnership are:

SP One Partners, Ltd.
1205 West Swann Avenue
Tampa, FL 33606

108-383

IN WITNESS WHEREOF, the undersigned has signed this Certificate of Limited Partnership as General Partner, pursuant to the provisions of Section 620.1204 of the Florida Revised Uniform Limited Partnership Act of 2005.

DATED: March 26, 2008.

SP ONE PARTNERS, LTD., a Florida
limited partnership, its General Partner

By: SP One Holdings, Inc., a
Florida corporation, its General
Partner

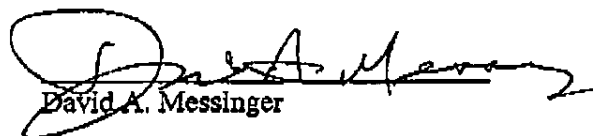
By: Debra F. Koehler
Name: Debra F. Koehler
Title: President

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ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

I, David A. Messinger, hereby accept my appointment as registered agent for SP ONE, LTD., a Florida limited partnership. 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.

DATED: March 24, 2008


David A. Messinger

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