

# **Certificate of Limited Partnership**

**A08000001055  
FILED  
December 22, 2008  
Sec. Of State  
gharvey**

Name of Limited Partnership:  
**F.M. PARTNERS I LIMITED PARTNERSHIP**

Street Address of Limited Partnership:  
**4801 PGA BLVD.  
PALM BEACH GARDENS, FL. US 33418**

Mailing Address of Limited Partnership:  
**4801 PGA BLVD.  
PALM BEACH GARDENS, FL. US 33418**

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

**NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL. 33331**

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

Registered Agent Signature: **SUE JOHNSON**

The name and address of all general partners are:

**Title: G  
FMGP INC.  
4801 PGA BLVD  
PALM BEACH GARDENS, FL. 33418 US**

The effective date for this Limited Partnership shall be:

**12/22/2008**

Signed this Twenty Second day of December, 2008

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: **PHILLIP WM. FISHER, PRESIDENT**