

Division of Corporation

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Florida Department of State  
Division of Corporations  
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# Electronic Filing Cover Sheet

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**FLORIDA/FOREIGN LP/LLLP**

**Hanson Family Partnership, L.P.**

Certificate of Status	1
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**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR HANSON FAMILY PARTNERSHIP, L.P.**

The undersigned, being desirous of forming a limited partnership under the laws of the State of Florida, does hereby certify as follows:

1. The name of the limited partnership is HANSON FAMILY PARTNERSHIP, L.P. (the "Partnership").

2. The mailing address for the principal office of the Partnership in the State of Florida is located at 9344 Sweetgrass Way, Naples, Florida, 34109, or at such other location in the State of Florida as the General Partner may determine from time to time.

3. The name and the business address of the General Partner of the Partnership is Michael E. Hanson, who has a business address at 9344 Sweetgrass Way, Naples, Florida 34109.

IN WITNESS WHEREOF, the undersigned has duly executed this certificate of Limited Partnership as of the 25<sup>th</sup> day of November, 2008.

By: Michael E. Hanson GP  
Michael E. Hanson, General Partner

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the limited partnership is HANSON FAMILY PARTNERSHIP, L.P.
2. The name and address of the registered agent and office is:

Joe B. Cox, Esq.  
c/o Cox & Nici  
1185 Immokalee Road, Suite 110  
Naples, Florida 34110

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated in this certificate, 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 duties, and I am familiar with and accept the obligations of my position as registered agent, as provided for in the Florida Statutes.*

Dated: Jan 6, 2009

By: Joe B Cox  
Joe B. Cox, Esq.  
Initial/Registered Agent

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