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CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NAQUADAH
Limited Partnership

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CERTIFICATE OF LIMITED PARTNERSHIP
OF
NAQUADAH LIMITED PARTNERSHIP

The undersigned, desire to form a limited partnership under the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statute §620.1101 et. al., make the following certificate:

1. The name of the limited partnership shall be: NAQUADAH LIMITED PARTNERSHIP.

2. The Limited Partnership is created and formed for the purpose of engaging in all lawful business.

3. The street mailing address, location of the office and principal place of business for the limited partnership shall be 2064 DOLPHIN BOULEVARD SOUTH, ST. PETERSBURG, FLORIDA 33707.

4. The name and business address of the general partner is MOLINA, LLC, whose business address is 2064 DOLPHIN BOULEVARD SOUTH, ST. PETERSBURG, FLORIDA 33707.

L09000113308

5. The partnership shall be perpetual.

6. The registered agent and its address for service of process as required by Florida Statute §620.1114 for the limited partnership shall be:

O'CONNOR & ASSOCIATES
1250 BELCHER ROAD, SUITE 160
LARGO, FL. 33771

The undersigned shall serve as a Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 1ST day of DECEMBER, 2009.

WITNESSES:

General Partner

MOLINA, LLC, a Florida limited liability corporation as general partner

By: _____
KATHLEEN A. GEIGER, its Manager

STATE OF FLORIDA)
COUNTY OF PINELLAS) S.S.

The foregoing instrument was acknowledged before me this 1ST day of DECEMBER, 2009, by KATHLEEN A. GEIGER as Manager of MOLINA, LLC, as general partner, on behalf of the NAQUADAH LIMITED PARTNERSHIP, a Florida Limited Partnership. She is personally known to me or has produced Florida Drivers Lic. as identification and did take an oath.

PATTI S. BUNCE
MY COMMISSION EXPIRES
April 27, 2013
NOTARY PUBLIC STATE OF FLORIDA

_____
Notary Public
State of Florida
My Commission Expires:

Acknowledgment of Registered Agent

I hereby am familiar with and accept the duties and responsibilities as Registered Agent pursuant to Florida Statute §620.1114 for said limited partnership.

By: _____
Patrick M. O'Connor
Registered Agent