

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H10000239920 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Fax Number

: (850) 617-6383

From:

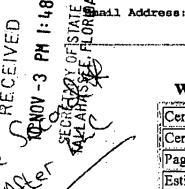
Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

Phone Fax Number : (850)222-1173 : (850)224-1640

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **



FLORIDA/FOREIGN LP/LLLP

WCD FAMILY PARTNERSHIP, L.P.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

T. CLINE

NOV - 4 2010

Electronic Filing Menu

Corporate Filing Menu

Help

H100002399203

CERTIFICATE OF LIMITED PARTNERSHIP OF

WCD FAMILY PARTNERSHIP, L.P.

a Florida limited partnership

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620 of the Florida Statutes, does hereby state the following:

1. The name of the Partnership is:

WCD FAMILY PARTNERSHIP, L.P.

2. The address of the office of the Partnership is:

One South School Avenue, Suite 500 Sarasota, Florida 34237

3. The name and address of the agent for service of process on the Partnership is as follows:

Gregory S. Band One South School Avenue, Suite 500 Sarasota, Florida 34237

4. The names and business address of the general partner is as follows:

SSAB HOLDINGS, LLC One South School Avenue, Suite 500 Sarasota, Florida 34237

5. The mailing address of the Partnership is:

One South School Avenue, Suite 500 Sarasota, Florida 34237

6. The effective date of this Certificate of Limited Partnership shall be November 3, 2010.

ı

00032541.WPD;1

UO-114447

H10000239920 3

The execution of this certificate by the undersigned general partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by Gregory S. Band, as Authorized Representative of SSAB HOLDINGS, LLC, a Florida limited liability company, the general partner of WCD FAMILY PARTNERSHIP, L.P., a Florida limited partnership, this 29 day of october, 2010.

"GENERAL PARTNER"

WITNESSES AS TO:

Gregory S. Band, as

Authorized Representative

SSAB HOLDINGS, LLC.

a Florida limited liability company,

By: Gregory S. Band, as Authorized

Representative

H10000239920 3

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named to accept service of process for WCD FAMILY PARTNERSHIP, L.P., at the place designated in the foregoing Certificate of Limited Partnership, I, Gregory S. Band, hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.1117, Florida Statutes.

Gregory S. Band Registered Agent

Date:

October 29,2010

ZERNOV -3 AH D 37