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(Requestor's Name)

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(City/State/Zip/Phone #)

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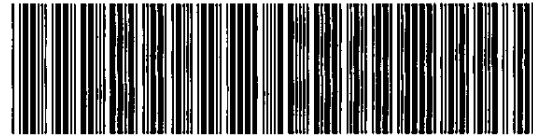
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10 NOV 23 AM 11:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 24 2010

EXAMINER



**KEASLER LAW GROUP**  
INTEGRAL COUNSEL

November 22, 2010

**VIA FEDERAL EXPRESS,**  
**OVERNIGHT DELIVERY**  
**TRACKING NO.: 796476374376**

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
**10 NOV 23 AM 11:57**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**Re: Wilde, Ferguson, Keasler, LLLP**

Dear Sir/Madam:

Please find enclosed the original and one (1) copy of the Certificate of Limited Partnership for a Florida Limited Liability Limited Partnership for Wilde, Ferguson, Keasler, LLLP. Also, enclosed is a check in the amount of \$1,061.25 representing the filing fees of same and the request for a Certified Copy and Certificate of Good Standing.

If you have any questions and/or need additional information, please do not hesitate to contact our office. Thanking you for your assistance in this matter.

Sincerely,

Tera J. Whitmore  
Legal and Executive Assistant  
**Keasler Law Group**

Enclosures

CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

FILED  
10 NOV 23 AM 11:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I**

**Name**

The name of the Florida Limited Liability Limited Partnership is Wilde, Ferguson, Keasler, LLP.

**ARTICLE II**

**Principal Office and Mailing Address**

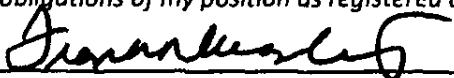
The address of the principal office and mailing address of the Florida Limited Liability Limited Partnership is 10245 Centurion Parkway North, Suite 305, Jacksonville, Florida 32256.

**ARTICLE III**

**Registered Office and Agent**

The street address of the registered office in the State of Florida is 10245 Centurion Parkway North, Suite 305, Jacksonville, Florida 32256. The name of the registered agent at such address is Frank R. Keasler, Jr.

*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 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.*



Registered Agent's Signature

**ARTICLE IV**

**Election**

Pursuant to §620.1201(d) this partnership elects to be and is a limited liability limited partnership.

**ARTICLE V**

**General Partners**

The names and business addresses of each general partner of the Florida Limited Liability Limited Partnership are as follows:

**Names of General Partners:**

**Stephen J. Wilde, Esq.**

**Addresses:**

84 West Walnut Street  
Suite 202  
Asheville, NC 28801

**Michael Greg Ferguson, Esq.**

84 West Walnut Street  
Suite 202  
Asheville, NC 28801

**Frank R. Keasler, Jr., Esq.**

10245 Centurion Parkway No.  
Suite 305  
Jacksonville, FL 32256

No Partner of this Partnership, including but not limited to, the above named General Partners shall have any personal liability for the acts of the Partnership or of a Partner therein.

**ARTICLE VI**  
**Effective Date**

Pursuant to §620.1201(3) the effective date and time for the organization of this Florida Limited Liability Limited Partnership is upon the filing of this Certificate of Limited Liability

Signed this 22nd day of November, 2010.

*Signature of each general partner: We submit this document and affirm that the facts stated herein are true. We are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, Florida Statutes.*

  
Stephen J. Wilde, Esq.

  
Michael Greg Ferguson, Esq.

  
Frank R. Keasler, Jr., Esq.

**END OF CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP  
FOR  
WILDE, FERGUSON, KEASLER, LLLP.**

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