

ACCOUNT NO. : 072100000032

REFERENCE :

894002

9960A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: July 16, 1998

ORDER TIME : 2:33 PM

ORDER NO. : 894002-020

CUSTOMER NO:

9960A

CUSTOMER: David H. Peek, Esq

PEEK, COBB, EDWARDS & ASHTON

100002592441--5 -07/20/98--01001--006

****140.00 ****140.00

Suite 1609

1301 Riverplace Boulevard Jacksonville, FL 32207

DOMESTIC FILING

NAME:

TREEHOUSE OF JACKSONVILLE, LTD

EFFECTIVE DATE:

ARTICLES OF INCORPORATION __CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIAL





July 20, 1998

JANNA WILSON CSC NETWORKS TALLAHASSEE, FL

SUBJECT: TREEHOUSE OF JACKSONVILLE, LTD.

Ref. Number: W98000016463

We have received your document for TREEHOUSE OF JACKSONVILLE, LTD. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$140.00 payment.,

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 698A00038439

SECRETARY OF STATE OF STATE OF STATE OF CORPORATE OF CORP



Amended CERTIFICATE OF LIMITED PARTNERSHIP OF TREEHOUSE OF JACKSONVILLE, LTD.

The undersigned, having formed a limited partnership under the laws of the Startflorida, do hereby certify as follows:

- 1. The name of this limited partnership is TREEHOUSE OF JACKSONVILLE, LTD.
- 2. The mailing address of this limited partnership is 1357 West Beaver Street, P.O. Box 40606, Jacksonville, Florida, 32203.
- The name and principal business address of the General Partner of the partnerships TH MANAGEMENT, INC., a Florida corporation, 1357 West Beaver Street, P.O. Box 46606, Jacksonville, Florida, 32203.
- 4. The term for which the partnership shall exist shall commence on the date hereof and shall continue for thirty (30) years from such date, unless the partnership is sooner dissolved and terminated as provided by law or in the Agreement of Limited Partnership by which the partnership shall be governed.
- 5. The street address of the registered office for the partnership is 1357 West Beaver Street, P.O. Box 40606, Jacksonville, Florida, 32203, and the name of the registered agent for service of process at that address is CHARLES O. CHUPP, who is joining in the execution hereof for the propose of accepting the appointment as registered agent for service of process for the partnership.

IN WITNESS WHEREOF, the undersigned have executed this Certificate this /4 day of July, 1998.

GENERAL PARTNER:

THJ MANAGEMENT, INC.

Charles O. Chupp
Its President

Its Secretary

REGISTERED AGENT:

Charles O. Chupp