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NAME	:	NORTHUP FAMIL PARTNERSHIP	Y LIMITED	N. BAGK BALANCE DU PEFIIND		
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CONTACT PERS	SON:	Michelle Baile	ey EXAMINER'S	INITIALS	s. /-)	Ĩ

CERTIFICATE OF LIMITED PARTNEPSHIP OF

NORTHUP FAMILY LIMITED PARTNERSHIP

We, the undersigned, desiring to form a partnership, pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Section 620.101 et seq. of the Florida Statutes, certify:

1.	Northup Family Limited Partnership, must contain the word "Limited"	prship					
2.	2201 Canty Court, Sto. 100, Sarasota, FL 34232 (Duriness address of Landed Partnership)						
3.	Molody Gonson (Name of Registered Agent for Service of Process)						
4.	2201 Cantu Court, Sto. 100, Sarasota, FL 34232						
5.	(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)						
6.	2201 Cantu Court, Ste. 100, Sarasota, FL 34232 (Mailing Address of the Limited Pattnership)						
7.	The latest date upon which the Limited Partnership is to be dissolved is <u>December 31, 2050</u>						
8.	Name of general partner(s):	Specific address:					
	Ronald S. Northup	2201 Cantu Court, Ste. 100 Sarasota, FL 34232					
	Diane T. Northup	2201 Cantu Court, Ste. 100 Sarasota, FL 34232					
Signe	d this // day of	, 1996.					
	Il Mortost	Une - Saltan					
	Ronald S/ Northup General Partner	Diane T. Northup General Partner					

AFFIDAVIT OF CAPITAL CONTRIDUTIONS

The undersigned constituting all of the general partners-bf NORTHUP FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership, cortify:

The amount of capital contributions to date of the limited partners is \$ 2,021,465,60 .

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 2,021,465,60 .

FURTHER AFFIANT SAYETH NOT.

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

C/ (Rotter)	the state of the second
Ronald S/ Northup	Diane T. Northup
This Widay of June	, 199 <u>/</u> c.

STATE OF FLORIDA COUNTY OF SARASOTA

I HEREBY CERTIFY that on this day personally appeared Ronald s. Northup, and Diane T. Northup, who are [X] personally known to or [__] who have produced identification, who have executed the foregoing instrument and who acknowledged before me that the facts contained therein are true and correct to the best of his or her knowledge and belief.

WITNESS my hand and official seal in Sarasota County, State of Florida, this //2 day of June, 1996.



"OFFICIAL SEAL" Dawn D. Kienbaum My Commission Expires 2/19/99 Commission #CC 439818

Naun H Gustaum Notary Public

My commission expires: 2-19 99