

A LOCAL OFFICE  
TO KNOW YOU  
A NATIONAL NETWORK  
TO SERVE YOU



networks  
PIONEER-HALL  
LEGAL & FINANCIAL SERVICES

1201 HAYS STREET  
TAHALASSEE, FL 32301-2607  
800-344-8086  
800-344-8087  
800-344-8088

800-344-8086

A96000001858

ACCOUNT NO. : 072100000032

REFERENCE : 110160 4343687

1000001969691

-10/09/96--01105--010

\*\*\*\*1750.00 \*\*\*\*1750.00

AUTHORIZATION :

COST LIMIT : \$ PPD

-----  
ORDER DATE : October 4, 1996

ORDER TIME : 2:15 PM

ORDER NO. : 110160

CUSTOMER NO: 4343687

CUSTOMER: Ms. Shelley Weber  
GASSMAN & CONETTA, P.A.

Suite 102  
1245 Court Street  
Clearwater, FL 34616

1000001969691

-10/09/96--01105--011

\*\*\*\*\*35.00 \*\*\*\*\*35.00

DOMESTIC FILING

NAME: LANGWORTHY FAMILY  
PARTNERSHIP, LTD.

10/4/96  
3K  
FILING 1750.00  
R. AGENT FEE 35.00  
J. COPY  
TOTAL 1785.00  
N. BANK  
BALANCE DUE  
REFUND

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

EXAMINER'S INITIALS: BP

RECEIVED  
96 OCT -4 PM 3:37  
DIVISION OF CORPORATION

**CERTIFICATE OF  
LIMITED PARTNERSHIP  
OF  
LANGWORTHY FAMILY PARTNERSHIP, LTD.**

96 OCT -1 PH 356  
DIVISION OF CORPRA  
SECRETARY OF STATE  
FILED

**THIS CERTIFICATE OF LIMITED PARTNERSHIP OF LANGWORTHY FAMILY PARTNERSHIP, LTD., (the "Partnership") is being executed by the undersigned for the purpose of forming a Limited Partnership pursuant to the Florida Revised Uniform Limited Partnership Act.**

**FIRST:** The name of the Limited Partnership is **LANGWORTHY FAMILY PARTNERSHIP, LTD.**

**SECOND:** The address of the office of the Partnership where the records will be maintained is 15175 Rester Drive, Brooksville, FL 34613.

**THIRD:** The name and address of the agent for service of process is **ALAN S. GASSMAN, 1245 Court Street, Suite 102, Clearwater, Florida 34616.**

**FOURTH:** The names, business address and mailing address of each General Partner are as follows:

**PG LAND COMPANY, INC.**

15175 Rester Drive  
Brooksville, FL 34613

PC 4000076681

**FIFTH:** The mailing address of the Limited Partnership is 15175 Rester Drive Brooksville, FL 34613. The mailing address and the principal place of business address are the same.

**SIXTH:** The latest date on which the Limited Partnership is to dissolve is fifty years from the date this Certificate is filed with the Secretary of State of Florida.

I, the undersigned General Partner, declare under penalties of perjury that I have examined the foregoing and it is true, correct and complete.

**DATED** this 24 day of September, 1996.

**PG LAND COMPANY, INC.**

By:

Its:

John Langworthy  
President

"General Partner"

langworthy/partnership.flacertific.2  
:emt \*dm 9-10-96

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

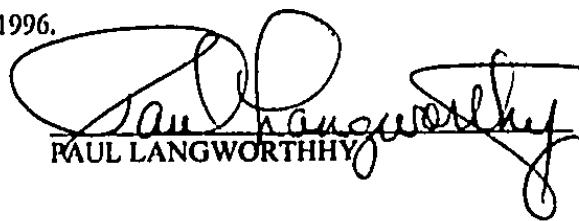
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
FILED OCT 4 1996 PM 3:56

**THE UNDERSIGNED**, President of PG LAND COMPANY, INC., a Florida Corporation, which is the General Partner of LANGWORTHY FAMILY PARTNERSHIP, LTD., a Florida Limited Partnership being formed pursuant to Florida Statute § 620.108, does hereby, under penalty of perjury and to the best of the undersigned's knowledge and belief, declare as follows:

The amount of capital contribution of the Limited Partners and the amount anticipated to be contributed by the Limited Partners with respect to the Partnership is \$ 250,000.00.

**FURTHER**, Affiant sayeth not.

DATED this 24 day of September, 1996.



PAUL LANGWORTHY

STATE OF FLORIDA )  
COUNTY OF PINELLAS )  
HIS HONOR

**BEFORE ME**, the undersigned authority, personally appeared PAUL LANGWORTHY, as President of PG LAND COMPANY, INC., who expressed that he executed the foregoing Affidavit for the purposes therein expressed.

**WITNESS** my official hand and seal this 24 day of Sept, 1996.



LISA H. BRUNE  
Notary Public

My Commission Expires:

langworthy\partnership.flr\affidavit.1  
:eml\*dm 9-12-96



## ACCEPTANCE OF REGISTERED AGENT

Pursuant to Florida Statute 48.091 and this Certificate of Limited Partnership, the undersigned Registered Agent does hereby accept the duties as Registered Agent and designates as his location for service of process as:

ALAN S. GASSMAN, ESQUIRE  
1245 Court Street  
Suite 102  
Clearwater, Florida 34616

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

  
ALAN S. GASSMAN, ESQUIRE (SEAL)