

CAPITAL CONNECTION, INC.
 417 E. Virginia Street, Suite 1, Tallahassee, FL 32301 (904) 244-8877
 Mailing Address: P.O. Box 10349, Tallahassee, FL 32309
 TOLL FREE: 1-800-331-8055
 FAX: (904) 244-8877

A96000002252

NAME _____
 FIRM _____
 ADDRESS _____
 PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

Hi Buck!

TX

J. FAX _____
 FILING _____ 1750.00
 R. AGENT FEE _____ 95.00
 C. COPY _____
 TOTAL _____ 1785.00
 N. BANK _____
 BALANCE DUE _____
 REFUND _____

REQUEST TAKEN CONFIRMED APPROVED
 DATE _____
 TIME _____
 BY [Signature] CK No. _____

WALK-IN 12/10 12:00
 WIR Pick Up _____

Capital Express™
 Art. of Inc. File _____
 Corp. Record Search _____
 ✓ Ltd. Partnership File _____
 Foreign Corp. File _____
 () Gen. Copy(s) _____

 Art. of Amend. File _____
 Dissolution/Withdrawal _____
 C U S- _____
 Fictitious Name File _____

 Name Reservation _____
 Annual Report/Reinstatement _____
 Reg. Agent Service _____
 Document Filing _____

 Corporate Kit _____
 Vehicle Search _____
 Driving Record _____
 Document Retrieval 100002029021-9

 UCC 1 or 3 File 12/12/96-01099-021
 UCC 11 Search ***1785.00 ***1785.00
 UCC 11 Retrieval _____
 _____ File No.'s _____ Copies _____
 Courier Service _____
 Shipping/Handling _____
 Phone () _____
 Top Priority _____
 Express Mail Prep. _____
 FAX () _____ pgs. _____
 SUBTOTALS _____

C.C. FEE. DISBURSED

SECRETARY OF STATE
 DIVISION OF CORPORATIONS

RECEIVED
 5 DEC 10 AM 11:14
 101 OF CORPORATION

FEE _____
 DISBURSED _____
 SURCHARGE _____
 TAX on corporate supplies _____
 SUBTOTAL _____
 PREPAID _____
 BALANCE DUE _____

Please remit invoice number with payment
 TERMS: NET 15 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum

THANK YOU
 from
 Your Capital Connection

**AFFIDAVIT AND
CERTIFICATE OF LIMITED PARTNERSHIP OF
BECHTOLD FAMILY
LIMITED PARTNERSHIP,
a Florida Limited Partnership**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC 10 AM 10:58

The undersigned general partners, 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, hereby state the following:

1. The name of the Limited Partnership is BECHTOLD FAMILY LIMITED PARTNERSHIP.

2. The address of the office of the Limited Partnership is 8133 Regents Court, University Park, Florida 34201.

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

Richard A. Bechtold 8133 Regents Court
University Park, Florida 34201

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

Bechtold Corporation 8133 Regents Court
University Park, Florida 34201

5. The mailing address of the Limited Partnership is 8133 Regents Court, University Park, Florida 34201.

6. The latest date upon which the Limited Partnership shall dissolve is December 31, 2030.

7. The actual and anticipated amount of capital contributions to be contributed by the limited partners is cash and other assets having the following values:

cash \$ 14,000.00

other assets \$ 2,213,500.00

\$ 2,227,500.00

8. The effective date of this Certificate of Limited Partnership shall be upon filing with the Department of State.

The execution of this Certificate by the undersigned general partner 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 the general partner on 10/17, 1996.

BECHTOLD FAMILY
LIMITED PARTNERSHIP

by

BECHTOLD CORPORATION,
General Partner

Richard A. Bechtold
RICHARD A. BECHTOLD
Its President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 10 AM 10:58

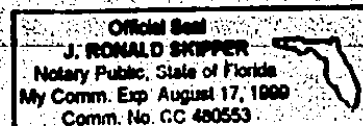
STATE OF FLORIDA

COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me on 10/17, 1996, by RICHARD A. BECHTOLD, as President of BECHTOLD CORPORATION, a Florida corporation. He is personally known to me.

J. Ronald Skipper
J. RONALD SKIPPER
(Print or stamp name)
Notary Public
Serial Number (if any) _____
Commission Expiration Date _____

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as the registered agent for the Bechtold Family Limited Partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.


RICHARD A. BECHTOLD

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 10 AM 10:58