



THE UNITED STATES
CORPORATION
COMPANY

A97000002405

ACCOUNT NO. : 072100000032

REFERENCE : 589936 10575A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : November 5, 1997

ORDER TIME : 9:59 AM

ORDER NO. : 589936-005

CUSTOMER NO: 10575A

CUSTOMER: Scott M. Colton, Esq
CROMWELL PFAFFENBERGER
DAHLMEIR BARNER ETAL
Suite 410
631 U.s. Highway One
North Palm Beac, FL 33408

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900002342069--9

-11/07/97--01107--010
****140.00 ****140.00

FILED
97 NOV -5 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: THE HARTLE FAMILY LIMITED-
PARTNERSHIP

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS:

TAX FILING 52.50
R. AGENT FEE 35.00
C. COPY 52.00
TOTAL 140.00
N. BANK
BALANCE DUE
REFUND

RECEIVED
97 NOV -5 AM 10:45
11/5/97

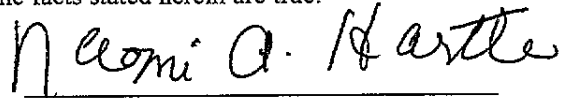
CERTIFICATE OF LIMITED PARTNERSHIP

FILED
97 NOV -5 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, in order to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Sections 620.101, et seq. of the Florida Statutes, do hereby certify:

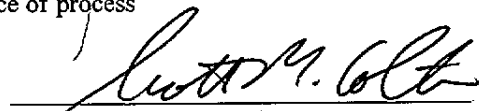
1. The name of the limited partnership is **THE HARTLE FAMILY LIMITED PARTNERSHIP**.
2. The address of the office of the partnership is 9103 Bay Cove Lane, Jacksonville, Florida 32257.
3. The name of the agent for service of process is **SCOTT M. COLTON, ESQUIRE**.
4. The name of the general partner is **NAOMI A. HARTLE, Settlor of THE NAOMI HARTLE REVOCABLE TRUST**, whose business address is 9103 Bay Cove Lane, Jacksonville, Florida 32257.
5. The mailing address for the limited partnership is 9103 Bay Cove Lane, Jacksonville, Florida 32257.
6. The latest date upon which the limited partnership is to dissolve is thirty-five (35) years from the filing of this Certificate.
7. This certificate is effective upon filing.

The undersigned affirms under penalties of perjury that the facts stated herein are true.



**NAOMI A. HARTLE, Settlor of The Naomi
A. Hartle Revocable Trust**

The undersigned hereby accepts his appointment as agent for service of process



SCOTT M. COLTON
631 U.S. Highway One, Suite 410
North Palm Beach, FL 33408

AFFIDAVIT

The undersigned, **NAOMI A. HARTLE**, the Settlor of The Naomi A. Hartle Revocable Trust, as the general partner of **THE HARTLE FAMILY LIMITED PARTNERSHIP**, being duly sworn, does hereby depose and say:

1. I am over the age of eighteen (18) years and believe in the obligation of an oath.
2. The limited partners have made no contributions to the partnership. No future contributions by the limited partners are anticipated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28 day of October, 1997.

Micki J. R.
Vicki Ferguson

Naomi A. Hartle
NAOMI A. HARTLE

STATE OF ~~FLORIDA~~ INDIANA
COUNTY OF ~~PALM BEACH~~ ST. JOSEPH

The foregoing instrument was acknowledged before me this 28 day of October, 1997 by **NAOMI A. HARTLE**, who is personally known to me or who has produced a driver's license as identification.

LeAnn McMurry
Notary Public
LE ANN McMURRY, NOTARY PUBLIC
A Resident of Elkhart County, Indiana
My Commission Expires 7-23-99
Type or print name

My Commission Expires: _____
My Commission No.: _____