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TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4000

FROM: SALLEY, FEINBERG & HAMES, P.A.

ACCT#: 072100000223

CONTACT: MS. ROSE MARIE WALLACE

PHONE: (407) 426-2360

FAX #: (407) 426-2361

NAME: MCCRARY FAMILY LIMITED PARTNERSHIP

AUDIT NUMBER.....H97000021375

DOC TYPE.....FLORIDA LIMITED PARTNERSHIP

CERT. OF STATUS..0

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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

December 31, 1997

ROSE MARIE WALLACE  
SALLEY FEINBERG & HAMES

SUBJECT: MCCRARY FAMILY LIMITED PARTNERSHIP  
REF: W97000028945

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 620.108, Florida Statutes, requires that limited partnership certificates include the mailing address in addition to the principal place of business address. Please correct your document accordingly. If the mailing address and principal place of business are one and the same, please be sure this is clearly reflected in your document.

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) 487-6020.

Tammi Cline  
Document Specialist

FAX Aud. #: H97000021375  
Letter Number: 597A00060976

CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
MCCRARY FAMILY LIMITED PARTNERSHIP

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

A. The name of the limited partnership is RAO FAMILY PARTNERSHIP, LTD.

B. The name and address of the agent for service of process to be maintained by Florida Statute §620.105 is:

<u>Name</u>	<u>Address</u>
Louise H. McCrary	1395 Bucksaw Place Longwood, FL 32750

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

<u>Name</u>	<u>Place of Business</u>
Louise H. McCrary	1395 Bucksaw Place Longwood, FL 32750

D. The mailing and business address for the limited partnership is:

McCrary Family Limited Partnership  
Attn: Louise H. McCrary  
1395 Bucksaw Place  
Longwood, FL 32750

E. The latest date upon which the limited partnership is to dissolve is December 31, 2017.

IN WITNESS WHEREOF the undersigned have executed this Certificate of Limited Partnership this 30<sup>th</sup> day of December, 1997.

Prepared by: Laurence C. Hames, Esq.  
PO Box 3829  
Orlando, FL 32802  
(407) 426-2360  
FL Bar #237914


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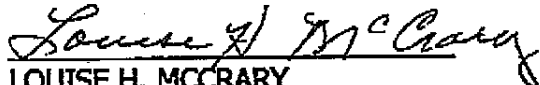
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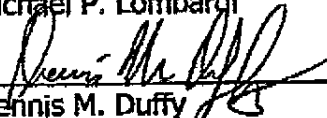
Signed, sealed and delivered  
in the presence of:

  
\_\_\_\_\_  
Michael P. Lombardi

  
\_\_\_\_\_  
Dennis M. Duffy

  
\_\_\_\_\_  
LOUISE H. MCCRARY

  
\_\_\_\_\_  
Michael P. Lombardi

  
\_\_\_\_\_  
Dennis M. Duffy

  
\_\_\_\_\_  
LOUISE H. MCCRARY, Registered  
Agent

STATE OF FLORIDA  
COUNTY OF ORANGE

BEFORE ME, the undersigned authority, personally appeared  
LOUISE H. MCCRARY, the sole General Partner who, upon first being duly sworn, deposes  
and says:

1. That the amount of the capital contributions of the limited partners and the  
total amount anticipated to be contributed by the limited partners is \$1,000.00.

Further Affiant sayeth not.

  
\_\_\_\_\_  
LOUISE H. MCCRARY

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TALLAHASSEE FLORIDA

The foregoing instrument was acknowledged before me this 30<sup>th</sup> of December, 1997, by LOUISE H. MCCRARY, the sole General Partner. She is personally known to me.

Lory Klopfenstein  
Print Name: \_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires:



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