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Address 222-6 100

	City/State	Z.P	I hollo ii	Office Use Only
	CORPORATION	NAMI	E(S) & DOCUMENT NUI	MBER(S), (if known):
	•	US poration 1	Club of T	allahaysee & Son
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	4(Cor	poration l	Name) (1	Document #)
	Walk in		t up time 3.20	Certified Copy
	Mail out NEW FILINGS		wait Photocopy	Certificate of Status
7	Profit	:	Amendment	5000024434255
	NonProfit		Resignation of R.A., Officer/Dir	00.400.400
	Limited Liability		Change of Registered Agent	
	Domestication		Dissolution/Withdrawal	98 R
	Other		Merger	
	OTHER TIEINGS: Annual Report		REGISTRATION/ QUARTICATION	DIVISION OF CORPORATION
	Fictitious Name		Foreign	58 S
	Name Reservation		Limited Partnership	BA S
	_		Reinstatement	
	·		Trademark	3/2/4
	•	[Other	1 10

CR2E031(1/95)

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP OF CAMPUS CLUB OF TALLAHASSEE A FLORIDA LIMITED PARTNERSHIP

The undersigned general partner, desiring to form a limited partnership, pursuant to the Florida Revised Uniform Limited Partnership Act, Chapter 620, Florida Statutes, hereby states the following:

- 1. The name of the Partnership is Campus Ciub of Tallahassee, Ltd.
- The address of the office of the Partnership is 4422 S.W. 85th Way, Gainesville, Florida 32608
- 3. The name and address of the agent for service of process on the Partnership is David H. Fort, 4422 S.W. 85th Way, Gainesville, Florida 32608.
- 4. The name(s) and address(es) of the general partner(s) of the partnership are as follows:

Campus Lodge, Inc. 4422 S.W. 85th Way - P970005 504 Gainesville, Florida 32680

- 5. The mailing address of the Partnership is 4422 S.W. 85th Way, Gainesville, Florida.
- 6. The latest date upon which the Partnership shall dissolve is December 31, 2035.

The date of formation of the partnership shall be the later of February 25, 1998 or the date of filing of this certificate with the Florida Department of State.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the sole general partner of the Partnership this 25th day of February, 1998

CAMPUS LODGE, INC.

President

Attest:

۷	is/are personally known to me.			
··-	produced a current	Florida driver's license as ident	ification.	
	Produced	as identification. Jean M. C	The state of the s	
		Signature of Notary	JEAN M. COURTER Notary Public - State of Florida My Commission Expires Mar 9, 2001 German - Co22019	
		Name of Notary (typed	Printed or Stamped)	
	,	Commission Number (i	f not legible on seal:	

STATE OF FLORIDA)

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared David H. Fort, the President of the general partner of Campus Club of Tallahassee, Ltd., a Florida limited partnership (the "Partnership"), who, being by me duly sworn, certified as follows:

- There have been no capital contributions made by limited partners as of the date hereof.
- Capital contributions of \$ #200,000 are anticipated to be made by the limited partners of the Partnership.

FURTHER AFFIANT SAYETH NOT.

The aregution of this Affidavit by the undersigned constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned has executed this Affidavit this 25th day of February, 1998

President

ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above stated limited partnership, at the place designated in the above Certificate of Limited Partnership, I hereby agree to act in the capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and I accept the obligations of a registered agent

David H. Fort

Date:

2/25/98

SECRETARY OF STATEME ONVISION OF CORPORATIONS