

A98000000709

APPLICANT'S NAME
Requestor's Name

Post Office Drawer 190
Address

Ailsa Ancheta
Tallahassee, FL 32302 224-1585

City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ~~R. TAMPA FRANCHISE~~
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 300002460083--2
-03/18/98-01002--003
****122.50 ****122.50
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #) 300002460083--2
-03/18/98-01002--004
*****17.50 *****17.50

- Walk in Pick up time 3/17/98 Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/> Profit	
<input type="checkbox"/> NonProfit	
<input checked="" type="checkbox"/> Limited Liability	
<input type="checkbox"/> Domestication	
<input type="checkbox"/> Other	

AMENDMENTS	
<input type="checkbox"/> Amendment	
<input type="checkbox"/> Resignation of R.A., Officer/ Director	
<input type="checkbox"/> Change of Registered Agent	
<input type="checkbox"/> Dissolution/Withdrawal	
<input type="checkbox"/> Merger	

OTHER FILINGS	
<input type="checkbox"/> Annual Report	
<input type="checkbox"/> Fictitious Name	
<input type="checkbox"/> Name Reservation	

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/> Foreign	
<input checked="" type="checkbox"/> Limited Partnership	
<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Trademark	
<input type="checkbox"/> Other	

4

87.50
52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 17 AM 9:09

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 18 AM 9:09

RECEIVED
MAR 17 PM 3:28
3/17/98

Examiner's Initials	
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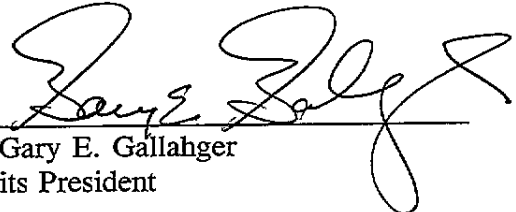
CERTIFICATE OF LIMITED PARTNERSHIP

THIS CERTIFICATE is made this 28th day of February 1998, by Gallagher Family, Inc., a Florida corporation, which is the sole general partner of RTT of Venice, Ltd. (the "Partnership"). The undersigned certifies as follows:

1. The name of the limited partnership is RTT of Venice, Ltd.
2. The address of the office required to be maintained by the Partnership in Florida pursuant to Section 620.105 of the Florida Statutes is 1017 Frankland Road, Tampa, Florida 33629, and the name and address of the agent for service of process is Gary E. Gallagher, 1017 Frankland Road, Tampa, Florida 33629.
3. The name of the sole general partner of the Partnership is Gallagher Family, Inc., and its business address is 1017 Frankland Road, Tampa, Florida 33629. #97000049105
4. The mailing address of the Partnership is 1017 Frankland Road, Tampa, Florida 33629.
5. The latest date upon which the Partnership is to dissolve is December 31, 2028.
6. This Certificate of Limited Partnership is made in accordance with Section 620.108 of the Florida Statutes.

GALLAGHER FAMILY, INC.
a Florida corporation

By: _____


Gary E. Gallagher
its President

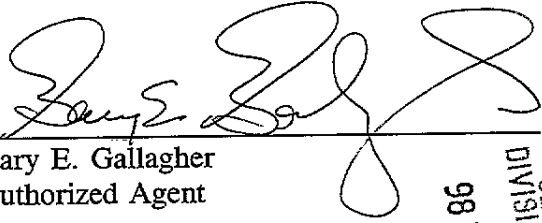
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 17 AM 9:09

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent to accept service of process for RTT of Venice, Ltd., a Florida limited partnership, at the place designated in the attached Certificate of Limited Partnership, the undersigned hereby accepts the appointment as Registered Agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

Dated this 28th day of February 1998.

By:



Gary E. Gallagher
Authorized Agent

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DIVISION OF CORPORATIONS
98 MAR 17 AM 9:09

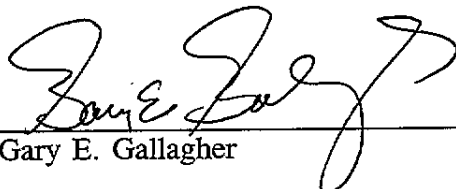
AFFIDAVIT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 17 AM 9:09

BEFORE ME, the undersigned authority, personally appeared Gary E. Gallagher, who, being by me first duly sworn, deposes and says:

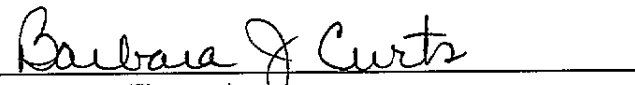
1. I am the President of Gallagher Family, Inc., a Florida corporation, which is the sole general partner of RTT of Venice, Ltd., a Florida limited partnership (the "Partnership"), and I am duly authorized to execute this affidavit on behalf of the Partnership.
2. The amount of the actual capital contribution of the limited partners to the Partnership is \$100.00, which is the total amount anticipated to be contributed by the limited partners.
3. This affidavit is made in compliance with Section 620.108(1) of the Florida Statutes.



Gary E. Gallagher

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

Sworn to and subscribed before me this 5th day of ^{march} ~~February~~ 1998, by Gary E. Gallagher, as President, of Gallagher Family, Inc., the sole general partner of RTT of Venice, Ltd., on behalf of the partnership. He [please check as applicable] / / is personally known to me, or has produced / / his (state) driver's license, or / / his (type of identification) as identification, and did not take an oath.



(Signature)
Name: Barbara J. Curts

(Legibly Printed)

Serial No. _____
Notary Public, _____
State of _____
 Barbara J. Curts
MY COMMISSION # CC699388 EXPIRES
December 7, 2001
BONDED THRU TROY FAIR INSURANCE, INC.

(AFFIX OFFICIAL SEAL)