CÖRPORATE ACCESS, Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303 INC. P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 CERTIFIED COPY (CORPORATE NAME & DOCUMENT #) 7.) (CORPORATE NAME & DOCUMENT #) 8.) _____(CORPORATE NAME & DOCUMENT #) 9.) _____(CORPORATE NAME & DOCUMENT #)

(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS_

THEOTINE DATE

CERTIFICATE OF LIMITED PARTNERSHIP OF E & S KLEIMAN LIMITED PARTNERSHIP

THE UNDERSIGNED, desiring to form the Limited Partnership of E & S KLEIMAN LIMITED PARTNERSHIP (the "Partnership"), pursuant to the Revised Uniform Limited Partnership Act of the State of Florida, hereby adopt, file, swear to and certify this Certificate:

- 1. Name. The name of the Partnership is E & S KLEIMAN LIMITED PARTNERSHIP (the "Partnership").
- 2. Location of the Principal Office and Mailing Address of the Partnership. The principal office of the Partnership referred to in Section 620.105, Florida Statutes, is located at and its mailing address is 653 Sabal Lake Drive, #103, Longwood, Florida 32779.
- 3. Agent for Service of Process. The name and address of the agent for service of process on the Partnership shall be Edward J. Kleiman at 654 Sabal Lake Drive, #103, Longwood, Florida 32779.
- 4. Name and Business Address of the Partners. The names and business addresses of the Partners, General and Limited, respectively, are as follows:

General Partner:

Limited Partners:

Edward J. Kleiman 653 Sabal Lake Drive, #103 Longwood, FL 32779

Edward J. Kleiman 653 Sabal Lake Drive, #103 Longwood, FL 32779

Susan H. Kleiman 653 Sabal Lake Drive, #103 Longwood, FL 32779

Susan H. Kleiman 653 Sabal Lake Drive, #103 Longwood, FL 32779

5. Term of the Partnership. The Partnership shall commence on November 5, 1998, and continue in existence until December 31, 2023, unless sooner terminated, liquidated or dissolved by law or in accordance with the Partnership Agreement.

IN WITNESS WHEREOF, the parties hereby have sworn to and signed and will cause to be duly filed this Certificate of Limited Partnership. This Certificate is executed this 5th day of November, 1998.

Edward J. K

Susan H. Kleiman

PRECTIVE DATE

STATE OF FLORIDA COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 5 day of November, 1998, by EDWARD J. KLEIMAN and SUSAN H. KLEIMAN, as General Partners of the E & S Kleiman Limited Partnership. Said persons did not take an oath and (check one) □ are personally known to me, produced a driver's license (issued by a state of the United States within the last five (5) years) as identification.

Print Name: Donna Batchelder
Notary Public - State of Florida
Commission Number: CC 456369
My Commission Expires: 08/04/99



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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared EDWARD J. KLEIMAN and SUSAN H. KLEIMAN, as General Partners for E & S KLEIMAN LIMITED PARTNERSHIP, a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, certified on behalf of the General Partners and the Partnership as follows:

- 1. The amount of the capital contributions made to the Partnership by the limited partners is \$980,000
- 2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$2,000,000

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, the undersigned declares that they have read the foregoing and that the facts alleged are true, to the best of their knowledge and belief.

Signed, sealed and delivered in the presence of:

Charles H. Stark

 \mathcal{L}

Donna Batchelder

Charles W. Stark

Donna Batchelder

E & S KLEIMAN LIMITED PARTNERSHIP

3v:

Edward J. Kleiman, as

General Partner

By: Susan &

Susan H. Kleiman, a

General Partner

STATE OF FLORIDA COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 5th day of November, 1998, by EDWARD J. KLEIMAN and SUSAN H. KLEIMAN, as General Partners of the E & S KLEIMAN LIMITED PARTNERSHIP. Said persons did take an oath and (check one) \square are personally known to me, \square produced a driver's license (issued by a state of the United States within the last five (5)

years) as identification.

DONNA BATCHELDER

MY COMMISSION # CC 456369

EXPIRES: August 4, 1999

Bonded Thru Notary Public Underwriters

Print Name: Donna Batchelder
Notary Public - State of Florida
Commission Number: CC 456369
My Commission Expires: 08/04/99

CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR THE SERVICE OF PROCESS WITHIN FLORIDA AND REGISTERED AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 620.192, Florida Statutes, the following is submitted:

E & S KLEIMAN LIMITED PARTNERSHIP, a limited partnership formed pursuant to the laws of the State of Florida with its registered office at 653 Sabal Lake Drive, #103, Longwood, Florida 32779, has named and designated Edward J. Kleiman as its Registered Agent to accept service of process within the State of Florida at said address.

ACKNOWLEDGMENT

Having been named to accept service of process for the abovenamed limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties as Registered Agent.

Dated this 5th day of November, 1998.

Edward J. Kleiman, Registered Agent