A9800002887

	THE UNITED STATES CORPORATION
	ACCOUNT NO. : 07210000032
	REFERENCE: 081366 80640A
	AUTHORIZATION :
-	COST LIMIT : PPD
C	ORDER DATE : December 29, 1998
c	ORDER TIME : 10:23 AM
c	ORDER NO. : 081366-005
C	CUSTOMER NO: 80640A
C	CUSTOMER: John K. Vreeland, Esq LANE TROHN CLARKE BERTRAND LANE TROHN CLARKE BERTRAND One Lake Morton Drive
-	
	DOMESTIC FILING
ED	NAME: BOBBY MOORE PROPERTIES, LTD 2000027249323 -12/29/9801051016 ***1837.50 ***1837.50
2	CEFFECTIVE DATE:
لا ت - لا	CERTIFICATE OF LIMITED PARTNERSHIP
۲ ۲	PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
2	XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
-	CONTACT PERSON: Cassandra Lamm EXAMINER'S INITIALS:

A918581

CERTIFICATE OF LIMITED PARTNERSHIP FOR BOBBY MOORE PROPERTIES, LTD.

I. NAME OF LIMITED PARTNERSHIP

The name of this Limited Partnership is BOBBY MOORE PROPERTIES, LTD., (referred to herein as the "Partnership").

II. PRINCIPAL PLACE OF BUSINESS OF PARTNERSHIP

The principal place of business of the office of the Partnership is as follows:

3706 DMG Drive Lakeland, Florida 33811

The mailing address of the office of the Partnership is as follows:

P.O. Box 5468 Lakeland, Florida 33803



III. NAME AND ADDRESS OF REGISTERED AGENT

The name and address of the Registered Agent for the Partnership is as follows:

W. MICHAEL MOORE 3706 DMG Drive Lakeland, Florida 33811

IV. NAME AND BUSINESS ADDRESS OF THE GENERAL PARTNERS

The Partnership has one general partner whose name and address is as follows:

BOBBY L. MOORE PROPERTY MANAGEMENT, INC. P98000102127 P.O. Box 5468 Lakeland, Florida 33803

V. LATEST DATE OF DISSOLUTION

The latest date upon which the Partnership is to dissolve is December 31, 2075.

This Certificate of Limited Partnership is signed by the general partner on this 21st day of December, 1998, and is made under penalties of perjury.

BOBBY L. MOORE PROPERTY MANAGEMENT, INC.

BOBBY IS MOORE, President

STATE OF FLORIDA

COUNTY OF POLK

The foregoing instrument was acknowledged before me on this <u>22nd</u> day of December ____, 1998, by BOBBY L. MOORE as president of BOBBY L. MOORE **PROPERTY MANAGEMENT, INC.:**

- who is personally known to me; or [/]
- who produced a driver's license issued by the Florida Department of [] Highway Safety and Motor Vehicles as identification; or
- [] who produced the following identification:



Signature:

ARY PUBLIC, State of Florida at Large

My Commission Expires: My Commission No.:

vped Name:

January 10, 1999 CC 422588



ACCEPTANCE BY REGISTERED AGENT

The undersigned, **REGISTERED AGENT**, hereby accepts the designation as Registered Agent for BOBBY MOORE PROPERTIES, LTD. and agrees to serve as such Registered Agent in accordance with the provisions of Chapter 620 of the Florida Statutes.

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W. MICHAEL MOORE, Registered Agent

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF POLK

The undersigned, being first duly sworn according to law, deposes and says:

1. This Affidavit is given pursuant to Section 620.112 of the Florida Statutes.

2. The undersigned is the general partner of **BOBBY MOORE PROPERTIES, LTD.**, a Florida limited partnership (the "Partnership").

3. The capital contributions of the limited partners of the Partnership as specified in the Limited Partnership Agreement for the Partnership is Two Million, Seven Hundred Sixty Thousand Dollars (\$2,760,000).

4. No additional capital contributions by the limited partners are anticipated at the present time.

Signed by the general partner of the Partnership this 22nd day of December,

BOBBY L. MOORE PROPERTY MANAGEMENT, INC.

BOBBY L. MOORE, President

The foregoing instrument was acknowledged before me on this <u>22nd</u> day of <u>December</u>, 1998, by **BOBBY L. MOORE**, as president of **BOBBY L. MOORE PROPERTY MANAGEMENT, INC.**:

- $[\checkmark]$ who is personally known to me; or
- [] who produced a driver's license issued by the Florida Department of Highway Safety and Motor Vehicles as identification; or
- [] who produced the following identification: _____



Signature:

₩TĂRY PUBLIC, State of Florida at Large

Typed Name: My Commission Expires: My Commission No.: John K. Vreeland

: <u>January 10. 1999</u> ____CC 422588

AFFIDAVI.FLP