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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

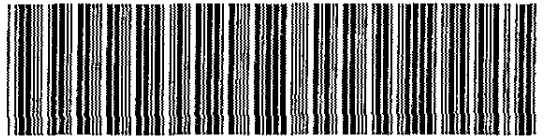
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OF COUNSEL:

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LEE J. OSIASON, P.A.**

**LL.M. TAXATION & FLORIDA BAR
BOARD CERTIFIED IN TAXATION

March 25, 2003

Department of State
Division of Corporations, Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: **BOAS FAMILY MANAGEMENT, LLC**
BOAS FAMILY HOLDINGS, LTD.

Dear Sir or Madam:

I am enclosing herewith the following documents and one check payable to the Florida Secretary of State for the combined stated filing fees of \$1,992.50, which entities should be formed in the following order:

1. Articles of Organization of the following LLC:

BOAS FAMILY MANAGEMENT, LLC	
Filing fees	\$ 100.00
Registered Agent Fees	\$ 25.00
Certified copy	<u>\$ 30.00</u>
Total	\$ 155.00

2. Certificate of Limited Partnership and Affidavit of Capital Contribution of **BOAS FAMILY HOLDINGS, LTD.**

Filing fee	\$1,750.00
Registered Agent Fee	\$ 35.00
Certified copy	<u>\$ 52.50</u>
Total	\$1,837.50

If you should have any questions please call me at my direct line (305) 357-1001 or cell phone 978-7980.

Sincerely,


Lee J. Osiason

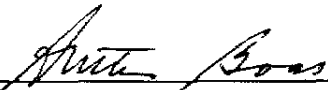
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF LIMITED PARTNERSHIP
OF
BOAS FAMILY HOLDINGS, LTD.**

THIS CERTIFICATE OF LIMITED PARTNERSHIP OF BOAS FAMILY HOLDINGS, LTD. (the "Partnership"), is being executed by the undersigned for the purpose of forming a Limited Partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986).

1. The name of the Limited Partnership is **BOAS FAMILY HOLDINGS, LTD.**
2. The address of the registered office of the Partnership is 6858 SW 89th Terrace, Pinecrest, FL 33156. The Partnership's registered agent at that address is ANITA BOAS and signs here to accept the designation as registered agent for service of process for the partnership:



ANITA BOAS

3. The name and business address of the Partnership's general partner is:
BOAS FAMILY MANAGEMENT, LLC, 6858 SW 89th Terrace, Pinecrest, FL 33156

4. The mailing address and principal place of business for the Partnership is
LO3-10990
6858 SW 89th Terrace, Pinecrest, FL 33156.

5. The latest date upon which the Partnership is to dissolve is December 31, 2060.

Under penalties of perjury, the undersigned sole general partner of the Partnership declares that it has read the foregoing and that the facts alleged are true and correct to the best of its knowledge and belief on March 25, 2003.

BOAS FAMILY MANAGEMENT, LLC, a
Florida limited liability company

By: 

ANITA BOAS, Member-Manager

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**GENERAL PARTNER'S AFFIDAVIT
OF CAPITAL CONTRIBUTIONS FOR
BOAS FAMILY HOLDINGS, LTD.**

BOAS FAMILY MANAGEMENT, LLC, a Florida limited liability company, the sole general partner of BOAS FAMILY HOLDINGS, LTD. (the "Partnership"), certifies as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, Two Million and No/100 (\$2,000,000.00) Dollars.
2. At this time, it is anticipated that no additional capital contributions will be made by the limited partners.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true and correct to the best of my knowledge and belief as of March, 2003.

GENERAL PARTNER:

BOAS FAMILY MANAGEMENT, LLC, a
Florida limited liability company,

By: Anita Boas
ANITA BOAS, Member-Manager

OFFICE OF THE
CLERK OF THE
SUPREME COURT
JUDICIAL CENTER
TALLAHASSEE
FLORIDA

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