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☐ PICK-UP

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(Business Entity Name)

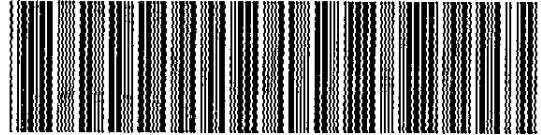
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TALLAHASSEE, FLORIDA

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03 AUG 12 AM 10:57
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DIVISION of CORPORATIONS
TALLAHASSEE, FLORIDA

BK

Capitol Services, Inc.

1045 Merritt Drive

Tallahassee, FL 32301

(850) 878-4734
Kathi or Brent

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TALLAHASSEE, FLORIDA

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

1. CR-TOP Associates, LTD
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 8/12/03

☒ Certified Copy

☐ Mail Out

☐ Will wait

☒ Photocopy

☒ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
CR-TOP ASSOCIATES, LTD.**

03 AUG 12 PM 12:25
FILED
TALLAHASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited partnership pursuant to Section 620.108 of the Florida Statutes, does hereby certify and swear to the following:

1. The name of the limited partnership is CR-TOP ASSOCIATES, LTD.
2. The location of the principal place of business of the limited partnership is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
3. The name of the agent for service of process on the limited partnership required to be maintained pursuant to the provisions of Section 620.105 of the Florida Statutes is W. Douglas Pitts, whose address is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
4. The name and business address of the general partner is NEWCASTER DEVCORP, INC., a Florida corporation, 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
5. The mailing address for CR-TOP ASSOCIATES, LTD., is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
6. The latest date upon which the limited partnership is to dissolve is December 31, 2054, unless otherwise agreed in writing by the partners.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the General Partner of CR-TOP ASSOCIATES, LTD., this 11th day of August, 2003.

GENERAL PARTNER:

NEWCASTER DEVCORP, INC., a Florida corporation

By: _____


W. Douglas Pitts
President

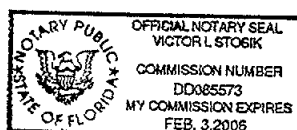
STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

BEFORE ME, personally appeared W. Douglas Pitts, known to me to be President of NEWCASTER DEVCORP, INC., a Florida corporation, the General Partner of CR-TOP ASSOCIATES, LTD., in the foregoing instrument, and known to me to be the person who executed the same, and he acknowledged before me that said instrument is his act and deed and that he executed the same for the purposes therein expressed in the capacities stated herein. He is personally known to me and did/did not take an oath.

WITNESS my hand and official seal in the State and County aforesaid this 11th day of August, 2003.


Name: _____
Notary Public, State of Florida

My Commission Expires:



C:\MyFiles\Legal\CR-TOP CLP wpd - 8/11/03

LIMITED PARTNERSHIP REGISTERED AGENT DESIGNATION

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF
PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHO PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 620.105(2), FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED:

CR-TOP ASSOCIATES, LTD., with its principal place of business at 701 Brickell Avenue,
Suite 1400, Miami, Florida 33131-2822, has named W. Douglas Pitts, located at 701 Brickell
Avenue, Suite 1400, Miami, State of Florida, as its Agent to accept service of process within Florida.

GENERAL PARTNER:

NEWCASTER DEVCORP, INC., a Florida
corporation

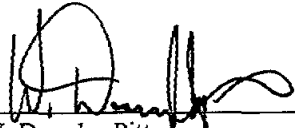
By:



W. Douglas Pitts
President

Date: August 11, 2003

Having been named to accept service of process as statutory registered agent for the above stated
limited partnership, at the place designated in this certificate, I hereby agree to act in that capacity,
and I further agree to comply with the provisions of all statutes relative to the proper and complete
performance of my duties, and I accept the duties and obligations of Section 620.192 Florida
Statutes.



W. Douglas Pitts

Date: August 11, 2003

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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03 AUG 12 PM 12:25
CLERK OF COURT
STATE OF FLORIDA
MIAMI COUNTY

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, personally appeared W. DOUGLAS PITTS, the President of NEWCASTER DEVCORP, INC., a Florida corporation, and the general partner of CR-TOP ASSOCIATES, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, certified as follows:

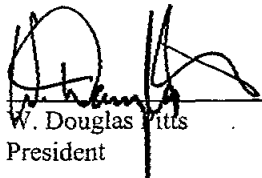
1. The amount of the initial capital contributions made by the limited partners to the Partnership is, in the aggregate, \$1,000.00.

2. At this time, the anticipated amount of the capital contributions to be made by the limited partners to the Partnership is, in the aggregate, \$6,500.00.

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

GENERAL PARTNER:

NEWCASTER DEVCORP, INC., a Florida corporation

By: 
W. Douglas Pitts
President

Date: August 11, 2003
Miami, Florida

BEFORE ME, the undersigned officer, a notary public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared W. Douglas Pitts, as President of Newcaster Devcorp, Inc., a Florida corporation and the General Partner of CR-TOP Associates, Ltd., known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as the President of the General Partner of said Partnership. He is personally known to me and did take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 11th day of August, 2003.


Name: _____
Notary Public, State of Florida

My Commission Expires:

