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4/25/95

FLORIDA DIVISION OF CORPORATIONS

12:02 AM

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(((H95000004634)))

ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: SHAW, FREEDMAN & FLETCHER, P.A.

DEPARTMENT OF STATE

FIRST UNION FINANCIAL CENTER S

STATE OF FLORIDA

200 BISCAYNE BLVD ST 4750

409 EAST GAINES STREET

MIAMI FL 33131-2362311-

TALLAHASSEE, FL 32399

CONTACT: HOWARD A COHEN

FAX: (904) 922-4000

PHONE: (305) 358-4440

FAX: (305) 358-0521

(((H95000004634)))

DOCUMENT TYPE: LIMITED PARTNERSHIP AMENDMENT

NAME: MEADOWOOD ESTATES, LTD.

FAX AUDIT NUMBER: H95000004634

CURRENT STATUS: REQUESTED

DATE REQUESTED: 04/25/1995

TIME REQUESTED: 12:02:17

CERTIFIED COPIES: 1

CERTIFICATE OF STATUS: 0

NUMBER OF PAGES: 3

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$105.00

ACCOUNT NUMBER: 072416000710

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit

number on the top and bottom of all pages of the document.

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FILED
1995 APR 25 PM 3:25
TALLAHASSEE, FLORIDA

Fax Audit N° H95000004634

AMENDED & RESTATED CERTIFICATE OF LIMITED PARTNERSHIP OF MEADOWOOD ESTATES, LTD.

This Amended & Restated Certificate of Limited Partnership of Meadowood Estates, Ltd., has been duly executed, is filed pursuant to Section 620.109, *Florida Statutes*, and shall become effective on the date of its execution as stated on Page 2 below. The original certificate of limited partnership was filed with the Florida Secretary of State on April 13, 1995.

1. The name of the limited partnership is:

Meadowood Estates, Ltd.

2. The address of the office and the name and address of the agent for service of process required to be maintained by Section 610.105, *Florida Statutes*, are:

Verninvest, Inc., a Florida corporation
7241 S.W. 168th Street
Miami, Florida 33157

3. The name and business address of each general partner is:

General Partner:

Verninvest, Inc.,
a Florida corporation

Business Address:

7241 S.W. 168th Street
Miami, Florida 33157

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1995 APR 25 PM 3:25
TALLAHASSEE, FLORIDA

Prepared by:
Howard Allen Cohen, Esq.
Florida Bar N° 190281
Shapo, Freedman & Fletcher, P.A.
200 S. Biscayne Boulevard, Suite 4750
Miami, Florida 33131-2352
Tel.: (305) 358-4440
Fax: (305) 358-0521

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1995 APR 25 PM 3 25
TALLAHASSEE, FLORIDA

4. The mailing address of the limited partnership is:

Meadowood Estates, Ltd.
7241 S.W. 168th Street
Miami, Florida 33157

5. The latest date upon which the limited partnership is to dissolve is December 31, 2020.

ENAJ CORP.
a Florida corporation,
Original & Retiring General Partner

Date: April 25, 1995

By: Jane Vernon
Jane Vernon, as Vice President

VERNINVEST, INC.,
a Florida corporation,
Substituted General Partner

Date: April 25, 1995

By: William G. Vernon
William G. Vernon, as President

Fax Audit No H95000004634...

The undersigned accepts the appointment as registered agent for the limited partnership pursuant to Section 610.105, *Florida Statutes*.

VERNINVEST, INC.
a Florida corporation

Date: April 25, 1995

By: William G. Vernon
William G. Vernon, as President

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Page 3
Fax Audit No H95000004634

Document Number Only

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FILED
STATE
SECRETARY OF CORPORATIONS
DATE: APR 13 PM 2:01

C T CORPORATION SYSTEM

Requestor's Name

1311 Executive Center Drive, ste. 200

Address

Tallahassee, FL 32301 (904) 656-0290
City State Zip Phone

CORPORATION(S) NAME

8000001158488

-04/18/95--01100--016

***1846.25 ***1846.25

Meadowood Estates, Ltd.

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☒ Mark

☒ Limited Partnership

☐ Reinstatement

☐ Annual Report

☐ Reservation

☐ Other

☐ Change of H.A.

☐ Fictitious Name

☒ Certified Copy

☐ Photo Copies

☒ CUS / G/S

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Initial Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CH2E031 (1.89)

4/13/95

3:00

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

FILED
FILING
R. AGENT FEE 17.50.01
C. COPY 35.41
TOTAL 52.91
V. BANK 7846.25
BALANCE DUE

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
MEADOWOOD ESTATES, LTD.**

1. The name of the limited partnership is:

Meadowood Estates, Ltd.

2. The address of the office and the name and address of the agent for service of process required to be maintained by Section 610.105, *Florida Statutes*, are:

Enaj Corp., a Florida corporation
7241 S.W. 168th Street
Miami, Florida 33157

3. The name and business address of each general partner is:

General Partner:

Enaj Corp.,
a Florida corporation

Business Address:

7241 S.W. 168th Street
Miami, Florida 33157

4. The mailing address of the limited partnership is:

Meadowood Estates, Ltd.
7241 S.W. 168th Street
Miami, Florida 33157

5. The latest date upon which the limited partnership is to dissolve is December 31, 2020.

FILED
STATE
DEPT. OF
CORPORATIONS
APR 13 PM 2:01

ENAJ CORP.
a Florida corporation,
General Partner

Date: April 11, 1995

By: Jane Vernon U.P.
Jane Vernon, as Vice President

The undersigned accepts the appointment as registered agent for the limited partnership pursuant to Section 610.105, *Florida Statutes*.

ENAJ CORP.
a Florida corporation

Date: April 11, 1995

By: Jane Vernon U.P.
Jane Vernon, as Vice President

FILED STATE
SECRETARY OF CORPORATIONS
APR 13 PM 2:01

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS TO
MEADOWOOD ESTATES, LTD.**

STATE OF FLORIDA)
) SS.:
COUNTY OF DADE)

FILED STATE
SECRETARY OF
95 APR 13 PM 2:01

JANE VERNON ("Affiant"), who, upon being duly cautioned and sworn, deposes and states as follows:

1. Affiant is the Vice President of Enaj Corp., a Florida corporation, which is the sole general partner of Meadowood Estates, Ltd., a Florida limited partnership.
2. The amount of the capital contributions of the limited partners and the amount anticipated at this time to be contributed by the limited partners is \$1,200,000.

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.

Jane Vernon, V.P.
JANE VERNON

THE FOREGOING INSTRUMENT was subscribed, sworn to, and acknowledged before me this 11 day of April, 1995, by Jane Vernon, who is personally known to me or who has produced _____ as identification and who did take an oath.

My commission expires:

Christie M. Engel
NOTARY PUBLIC, State of Florida
at Large

Notary Public, State of Florida
My Commission Expires Nov. 17, 1995
Bonded thru Fidelity Insurance Inc.
6105.015 041194 (15:04)
F:\WPDATA\08\BLNK\SJ230

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Division of Corporations
and
Business Regulation

1a. DOCUMENT #
A9500000604

FILED

96 JAN 17 AM 9:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MEADOWOOD ESTATES, LTD.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, if Applicable

Suite Apt # etc

City State & Zip

2a. New Principal Office Address, if Applicable

Suite Apt # etc

City State & Zip

Mailing Address

7241 S.W. 168TH STREET
MIAMI FL 33157

Principal Office Address

7241 S.W. 168TH STREET
MIAMI FL 33157

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in block 2 and/or 2a.

3. Date Formed or Registered to Do Business in
FLORIDA 04/13/1995

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Shown
on Record
\$1,200,000.00

5b. Amount of Capital Contributions in
FLORIDA to date
\$1,200,000.00

6. FEI Number

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$0.75 Additional Fee required
for a Certificate of Status

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75).
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

\$576.25

9. Name and Address of Current Registered Agent

VERNINVEST, INC.
7241 SW 168TH STREET
MIAMI FL 33157

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite Apt # etc

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

VERNINVEST, INC.

7241 S.W. 168TH STREE

MIAMI FL 33157

M31999

KWM

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

William G. Vernon

DATE

1/8/96

Typed or Printed Name of General Partner Signing Form

William G. Vernon

Telephone Number

305-448-1070

CR2E003 (6/95)