

**CERTIFICATE OF LIMITED PARTNERSHIP OF
THE IRA OSTROW FAMILY LIMITED PARTNERSHIP
A FLORIDA LIMITED PARTNERSHIP**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
1 MAY -1 PM 2:14 '96

The undersigned Officer of the General Partner desiring to form a partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is THE IRA OSTROW FAMILY LIMITED PARTNERSHIP.

2. The address of the office of the Partnership is c/o Ira Ostrow, 8023 Fisher Island Drive, Fisher Island, FL 33109-1049.

3. The address of the agent for service of process of the Partnership is c/o Barry A. Nelson, Esq., Nelson & La Femina, One Turnberry Place, Suite 609, 19495 Biscayne Boulevard, N. Miami Beach, FL 33180 and the name of the initial registered agent is Barry A. Nelson.

4. The name and business address of the General Partner is Ira Ostrow Family Holdings, Inc., 8023 Fisher Island Drive, Fisher Island, FL 33109-1049.

5. The mailing address of the Partnership is the Ira Ostrow Family Limited Partnership, 8023 Fisher Island Drive, Fisher Island, FL 33109-1049.

6. The latest date upon which the Partnership shall dissolve is no later than December 31, 2045, unless the Partners agree to extend the term.

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This Certificate is duly executed and is being filed in accordance with section 620.108 of the Florida Revised Uniform Limited Partnership Act (1986).

The execution of this Certificate by the undersigned Officer of the General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by IRA OSTROW an Officer of the General Partner of The IRA OSTROW Family Limited Partnership this 7th day of April, 1996.

THE IRA OSTROW FAMILY
LIMITED PARTNERSHIP

By 

Name: Ira Ostrow

In his Capacity as President & Officer of
Ira Ostrow Family Holdings, Inc.,
General Partner

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF PUBLIC OPERATIONS
96 MAY -1 PM 2:14

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

STATE OF FLORIDA
SECRETARY OF STATE
DIVISION OF NOTARIES
95 MAR -1 PM 2:15

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared IRA OSTROW, personally known to me or who has produced _____ (type of identification) and has acknowledged before me that he executed the foregoing freely and voluntarily for the purpose therein expressed, who did take an oath.

WITNESS my hand and official seal at said County and State, this 29th day of April, 1996.



NOTARY PUBLIC, State of Florida

My Commission Expires:



ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for The Ira Ostrow Family Limited Partnership, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of the registered agent.

By: 
Barry A. Nelson

ostrow/cert-2.doc

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DIVISION OF CORPORATIONS
96 MAY -1 PM 2:15