

A98000001417



ACCOUNT NO. : 072100000032

REFERENCE : 842447 4310694

AUTHORIZATION : Patricia Pizut

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ORDER DATE : June 3, 1998

ORDER TIME : 12:34 PM

ORDER NO. : 842447-005

CUSTOMER NO: 4310694

400002546554-0

CUSTOMER: Martha Freeman, Legal Asst
BROAD AND CASSEL

Suite 3000
201 South Biscayne Boulevard
Miami, FL 33131

DOMESTIC FILING

NAME: ALLEN G. W. AND DORIS S.
MCLEOD FAMILY INVESTMENTS, LTD

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS: _____

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Acknowledgement	MATA
W. P. Verifier	MATA

A98-1417



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 3, 1998

CSC CORPORATION COMPANY
CHRISTOPHER SMITH

SUBJECT: ALLEN G.W. AND DORIS S. MCLEOD FAMILY INVESTMENTS,
LTD
Ref. Number: W98000012769

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This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Section 620.108, Florida Statutes, requires the affidavit include the amount of capital contributions of the limited partners and the amount anticipated to be contributed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 698A00031420

RESUBMIT

Please give original
submission date as file date.

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**AFFIDAVIT AND CERTIFICATE
OF
LIMITED PARTNERSHIP
OF
ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD.**

I, ALLAN G. W. MCLEOD and DORIS S. MCLEOD, as Tenants by the Entirety, the undersigned General Partners of the ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., do hereby enter into this Certificate of Limited Partnership, under and pursuant to Chapter 620 of the Florida Statutes, and being duly sworn, do hereby certify, state and declare as follows:

ARTICLE I

The name of the limited partnership, which is hereafter referred to as the "Limited Partnership", shall be ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD.

ARTICLE II

The principal place of business and the mailing address of the Limited Partnership in Florida shall be 3251 Morris Lane, Coconut Grove, Florida 33133.

ARTICLE III

The street address of the initial registered office of the Limited Partnership is 201 S. Biscayne Boulevard, Suite 3000, Miami, Florida 33131 and the initial registered agent of the Limited Partnership at that address is B & C Corporate Services, Inc. *L02920*

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ARTICLE IV

The name and business address of the General Partner of the Partnership is as follows:

<u>Name</u>	<u>Address</u>
Allan G. W. McLeod and Doris S. McLeod, as Tenants by the Entirety	3251 Morris Lane Coconut Grove, Florida 33133

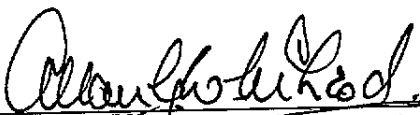
ARTICLE V

The Partnership shall commence on the earlier of June 15, 1998 or upon the filing of this Certificate of Limited Partnership with the Secretary of State of the State of Florida. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2050, unless extended in writing as provided in the Partnership Agreement.

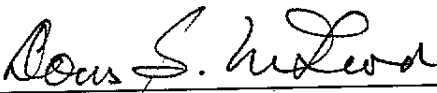
Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 29 day of May, 1998.

GENERAL PARTNERS:



Allan G. W. McLeod, as Tenant by
the Entirety



Doris S. McLeod, as Tenant by
the Entirety

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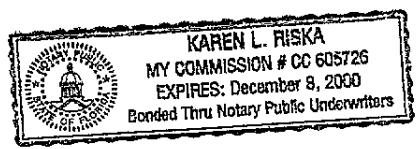
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STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 29th day of May 1998 by ALLAN G. W. MCLEOD, General Partner of ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., who is either personally known to me or has produced _____ as identification.

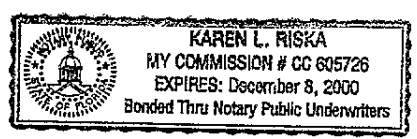
Karen L. Riska
Signature of Notary Public
Print Name: KAREN L. RISKKA
State of: Florida
My Commission Expires:



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

The foregoing instrument was acknowledged before me this 29th day of May 1998 by DORIS S. MCLEOD, General Partner of ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., who is either personally known to me or has produced _____ as identification.

Karen L. Riska
Signature of Notary Public
Print Name: KAREN L. RISKKA
State of: Florida
My Commission Expires:



ACCEPTANCE OF APPOINTMENT
OF
REGISTERED AGENT

I hereby accept the appointment as registered agent contained in the foregoing Certificate of Limited Partnership and state that I am familiar with and accept the obligations of Section 620.105 of the Revised Uniform Limited Partnership Act.

B & C CORPORATE SERVICES, INC.

By: Martha Freeman
Martha Freeman, Assistant Secretary

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR
ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD.**

BEFORE ME the undersigned, personally appeared Allan G. W. McLeod and Doris S. McLeod, as Tenants by the Entirety, the General Partners of ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, did certify as follows:

The amount of capital contribution of the Limited Partners is \$7,500.00.
The anticipated amount to be contributed will be zero.

FURTHER AFFIANT SAYETH NAUGHT.


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

Dated this 29 day of May, 1998.

GENERAL PARTNERS



Allan G. W. McLeod, as Tenant by
the Entirety



Doris S. McLeod, as Tenant by
the Entirety

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

The foregoing instrument was acknowledged before me this 29th day of May 1998 by ALLAN G. W. MCLEOD, General Partner of ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., who is either personally known to me or has produced _____ as identification.

Karen L. Riska
Signature of Notary Public
Print Name: KAREN L. Riska
State of: Florida
My Commission Expires:



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

The foregoing instrument was acknowledged before me this 29th day of May 1998 by DORIS S. MCLEOD, General Partner of ALLAN G. W. AND DORIS S. MCLEOD FAMILY INVESTMENTS, LTD., who is either personally known to me or has produced _____ as identification.

Karen L. Riska
Signature of Notary Public
Print Name: KAREN L. Riska
State of: Florida
My Commission Expires:

