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LAW OFFICES  
**BOYES & FARINA**  
PROFESSIONAL ASSOCIATION

CENTURION PLAZA  
1601 FORUM PLACE  
SUITE 900

WEST PALM BEACH, FLORIDA 33401

H/16

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BOARD CERTIFIED CIVIL TRIAL & BUSINESS  
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CERTIFIED LEGAL ASSISTANT

TELEPHONE (561) 697-9393  
FAX NO. (561) 697-8980

00789-02544-00671  
W99-8677

April 7, 1999

Via Federal Express

Florida Dept. of State  
PL02  
The Capitol  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

900002833259--2  
-04/08/99--01067--006  
\*\*\*\*385.00 \*\*\*\*385.00

Re: The Turchin Family Limited Partnership

Dear Sirs:

Please find enclosed an original and one copy of the following:

- (1) Affidavit (of Capital Contributions)
- (3) Registered Agent Notice
- (4) Certificate of Limited Partnership

I have also enclosed our firm's check in the amount of \$385.00 which represents the filing fee along with a completed Application for Employer Identification Number. This number has already been assigned through our office.

If you would, please file this Partnership Agreement and return the certified documents to the undersigned using the enclosed Federal Express airbill. Thank you for your prompt attention to this matter.

Very truly yours,

*John Farina*  
John Farina

Name	
Availability	
Document Examiner	
Updater	
Updater Verifier	
Acknowledgement	
W. P. Verifier	

JF/jm  
Enclosures

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 APR 16 AM 10:42



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

April 13, 1999

JOHN FARINA  
BOYES & FARINA  
1601 FORUM PLACE, SUITE 900  
WEST PALM BEACH, FL 33401

SUBJECT: THE TURCHIN FAMILY LIMITED PARTNERSHIP  
Ref. Number: W99000008677

We have received your document for THE TURCHIN FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$385.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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: 899A00018475

**CERTIFICATE OF LIMITED PARTNERSHIP**

The undersigned, in order to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Sections 620.101, et seq. Of the Florida Statutes, do hereby certify:

*MARTIN AND CHERYL*

1. The name of the limited partnership is *THE TURCHIN FAMILY LIMITED PARTNERSHIP*.
2. The address of the office of the partnership is 3060 Miro Drive South, Palm Beach Gardens, Florida 33410.
3. The name of the agent for service of process is John Farina, Esquire.
4. The name of the general partner is CHERYL TURCHIN whose known address is 3060 Miro Drive South, Palm Beach Gardens, Florida 33410.
5. The mailing address of the limited partnership is 3060 Miro Drive South, Palm Beach Gardens, Florida 33410.
6. The latest date upon which the limited partnership is to dissolve is thirty five (35) years from the filing of this Certificate.
7. This certificate is effective upon filing.
8. The undersigned affirms under penalties of perjury that the facts stated herein are true.

*Cheryl Turchin*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 APR 16 AM 10:42

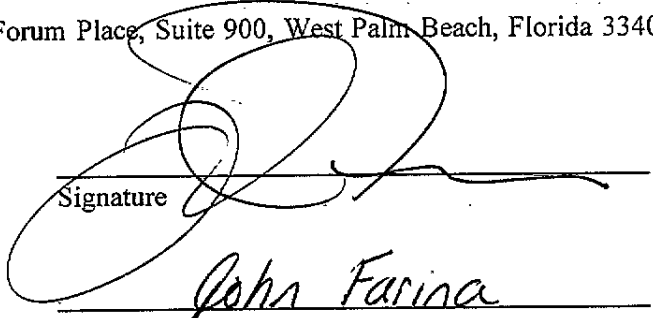
REGISTERED AGENT

MARTIN AND CHERYL

I, John Farina, do hereby acknowledge that I am the Registered Agent of the Turchin Family Limited Partnership. My address is 1601 Forum Place, Suite 900, West Palm Beach, Florida 33401.

Signature

Print Name

A large, stylized handwritten signature in black ink, appearing to read 'John Farina', is written over a horizontal line. Below this line, the name 'John Farina' is printed in a cursive font, also over a horizontal line.

AFFIDAVIT

*MARTIN AND CHERYL*

The undersigned, **CHERYL TURCHIN**, the general partner of **THE TURCHIN FAMILY LIMITED PARTNERSHIP**, being duly sworn, does hereby depose and say:

1. I am over the age of eighteen (18) years and believe in the obligation of an oath.
2. The limited partners have made contributions to the partnership. No future contributions by the limited partners is anticipated. (The amount of the contributions is \$50,000.00)

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1<sup>st</sup> day of March, 1999.

*Cheryl Turchin*  
\_\_\_\_\_  
CHERYL TURCHIN, General Partner

STATE OF FLORIDA

COUNTY OF

The foregoing instrument was acknowledged before me this 1<sup>st</sup> day of March, 1999 by CHERYL TURCHIN, General Partner, who is personally known to me or who has produced a driver's license as identification.

*Judy A. Miller*  
\_\_\_\_\_  
Notary Public  
Print Name Judy A. Miller  
My commission expires: \_\_\_\_\_  
My Comm. Number: \_\_\_\_\_

