

A99000001049

Greenberg Trautman

Requestor's Name

Address

Michelle 425-8526

City/State/Zip

Phone #

Office Use Only

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

1. 100 North Federal Associates, Ltd
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

FILED STATIONS
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
99 JUN 29 PM 1:49

Walk in

Pick up time call me

Certified Copy

Mail out

Will wait

Photocopy

Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

800002918528--9
-06/29/99-01048-005
***1837.50 ***1837.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ML 6/29/99

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 JUN 29 PM 12:58

RECEIVED

Examiner's Initials

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
100 NORTH FEDERAL ASSOCIATES, LTD.**

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THE UNDERSIGNED, constituting the general partner of **100 NORTH FEDERAL ASSOCIATES, LTD.** (the "Partnership"), does hereby submit the following information in accordance with the Florida Revised Limited Partnership Act (1986) to make public the information of the Partnership:

1. **Name** The name of the Partnership shall be **100 NORTH FEDERAL ASSOCIATES, LTD.**

2. **Registered Agent** The initial registered office of the Partnership in the State of Florida is 277 S.E. 5th Avenue, Delray Beach, Florida 33483. The name of the initial registered agent is the Cary Glickstein at the above address.

3. **General Partner** The name and address of the general partner of the Partnership is:

100 North Federal, Inc.
277 S.E. 5th Avenue
Delray Beach, Florida 33483

P99000051575

4. **Partnership Address** The office and mailing address for the Partnership shall be 277 S.E. 5th Avenue, Delray Beach, Florida 33483.

5. **Dissolution** The latest date upon which the Partnership will dissolve is December 31, 2049.

IN WITNESS WHEREOF, the undersigned does hereby execute this Certificate and attach an Affidavit declaring the amount of the capital contribution of the limited partners and the anticipated amount to be contributed by the limited partners.

100 NORTH FEDERAL, INC.
a Florida Corporation, as general partner



By: Cary Glickstein
Its: President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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BEFORE ME, the undersigned, general partner of 100 NORTH FEDERAL ASSOCIATES, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who upon being sworn, certify as follows:

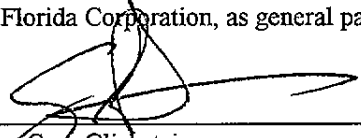
1. The amount of capital contributions of the limited partners is \$300
2. The anticipated amount of the capital contributions of the limited partners will be \$400,000

Dated this 28th day of June, 1999.

FURTHER AFFIANT SAYETH NOT.

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.

100 NORTH FEDERAL, INC.
a Florida Corporation, as general partner




By: Cary Glickstein
Its: President

STATE OF FLORIDA
COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 28th day of June, 1999, by Cary Glickstein, President of 100 North Federal, Inc., a Florida corporation, the general partner of the above-referenced Partnership, who is personally known to me or has produced _____ as identification.

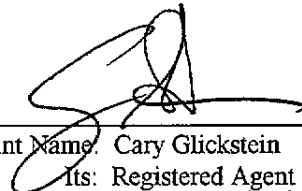


JANET M. TAGGART
My Comm Exp. 5/08/2001
Bonded By Service Ins
No. CC645813
 Personally Known Other I.D.


Print Name: Janet M. Taggart
Notary Public, State of _____
Commission Number: _____
My commission Expires: _____

ACCEPTANCE BY REGISTERED AGENT

THE UNDERSIGNED, as registered agent, appointed in accordance with the foregoing Certificate, does hereby accept such appointment, and does hereby state that it is familiar with, and accepts, the obligations imposed by Section 620.192 of the Florida Revised Uniform Limited Partnership Act (1986).



Print Name: Cary Glickstein
Its: Registered Agent

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