

The Salzman Partnership, L	Family Limited	900030577992 -12/13/9901092014 -****297.50 *****297.50
	34/3/99	Art of Inc. File V LTD Partnership File Cert. Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatemient Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search
Signature		Fictitious Owner Search Vehicle Search Driving Record
Requested by: LM Name	12/13 10:05 Date Time	UCC 1 or 3 File UCC 11 Search
Walk-In	Will Pick Up	UCC 11 Retrieval

CERTIFICATE OF LIMITED PARTNERSHIP OF SALZMAN FAMILY LIMITED PARTNERSHIP.

THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P. a Florida limited partnership

The undersigned general partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986), as set forth in Sections 620.101 - 620.186, of the Florida Statutes, hereby states the following:

- 1. The name of the Partnership is THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P.
- 2. The address of the office of the Partnership is 19401 W. St. Andrews Drive, Miami, Florida 33015.
- 3. The agent for service of process on the Partnership is GARY S. SALZMAN, ESQ., and his address is 111 N. Orange Avenue, Suite 875, Orlando, Florida, 32801.
- 4. The name and business address of the sole general partner is DAVID S. SALZMAN, 19401 W. St. Andrews Drive, Miami, Florida 33015.
- 5. The mailing address of the Partnership is 19401 W. St. Andrews Drive, Miami, Florida 33015.
 - 6. The latest date upon which the Partnership shall dissolve is December 31, 2015.
- 7. The effective date of this Certificate of Limited Partnership shall be the date that it is filed with the Secretary of State of the State of Florida.
- 8. A conveyance or encumbrance of real or personal property or any interest therein held in the Partnership name, and any other instrument affecting title to real or personally property in which the Partnership has an interest, shall be executed in the Partnership name by DAVID S. SALZMAN, the sole general partners of the Partnership.

The execution of this Certificate of Limited Partnership by the sole 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 the sole general partner of THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P., this ________ day of December, 1999.

DAVID S. SAĹZMANÌ

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P., 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 the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

DATED this 101 day of December, 1999.

REGISTERED AGENT

GARY S. SALZMAN, ESQ.

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THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P. AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA) COUNTY OF DADE)

BEFORE ME, the undersigned, personally appeared DAVID S. SALZMAN, the sole general partners of THE SALZMAN FAMILY LIMITED PARTNERSHIP, L.P., a Florida limited partnership (hereinafter the "Partnership"), whose business address is 19401 W. St. Andrews Drive, Miami, Florida 33015, who upon being duly sworn, certified as follows:

- 1. The amount of capital contributions to the Partnership made by the General Partner is approximately \$300.00, in cash and in kind securities.
- 2. The amount of capital contributions to the Partnership made by the Limited Partners is \$10,000.00 for each Limited Partner, making a total contribution of \$30,000.00.
- 3. The amount of additional capital contributions anticipated to be contributed by the limited partners or the general partner is \$0.00.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury the undersigned declares that he has read the foregoing and that the facts alleged are true, to the best of his knowledge and belief.

GENERAL PARTNER:

DAVID S. SALZMAN

STATE OF FLORIDA COUNTY OF DADE

BEFORE ME, the undersigned authority this _______ day of December, 1999, personally appeared DAVID S. SALZMAN, who is personally known to me or who have produced \(\subseteq \(\subseteq \subsete

NOTARY PUBLIC

(SEAL)

NORMA RODRIGUEZ

MY COMMISSION # CC 761472

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