

A9500000809



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

March 8, 1996

SIMCHA FAMILY LTD.
2509 BAYISLE DR.
FT. LAUDERDALE, FL 33327

SUBJECT: SIMCHA FAMILY LTD.
Ref. Number: A9500000809

To Whom It May Concern:

In a recent audit of our records we have determined that the original Certificate of Limited Partnership for SIMCHA FAMILY LTD., document number A9500000809, has been misplaced and has not been filmed for the official record.

The purpose of this letter is to ask you to furnish us with a photocopy of the certificate, so that we can complete our records.

Please send the copy to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn: Lyn Turley

I hope this request is not too much of an inconvenience.

Should you have any questions regarding this matter, please feel free to contact me at (904) 487-6900.

Sincerely,
Lyn Turley, Assistant Chief
Bureau of Commercial Recording

Letter number: 096A00010435

CERTIFICATE OF LIMITED PARTNERSHIP

OF

SIMCHA FAMILY LTD.,

a Florida Limited Partnership

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SECTION OF
DIVISION OF
95 MAY 26 PM 1:32

The undersigned General Partner, desiring to form limited partnership pursuant to the Florida Revised Uniform Limited Partnership law, hereby states the following:

1. The name of the partnership is SIMCHA FAMILY LTD.
2. The address of the office of the partnership is 16251 Golf Club Road, Apartment 209, Fort Lauderdale, Florida 33326.
3. The name and address of the agent for service of process on the partnership is ALAN B. COHN, c/o Abrams, Anton, Robbins, Resnick & Schneider, P. A., 2021 Tyler Street, Hollywood, Florida 33022.
4. The name and business address of the General Partner and the mailing address of the partnership are HERBERT W. TRINKLER and ELAINE TRINKLER, as tenants by the entirety, 16251 Golf Club Road, Apartment 209, Fort Lauderdale, Florida 33326.
5. The latest date upon which the partnership shall dissolve is December 31, 2045.
6. No Limited Partner shall be entitled to withdraw or demand the return of any part of its capital contribution except upon dissolution of the partnership.

7. All annual net profits of the partnership shall be divided among the partners in the same proportions as the partners' then capital accounts unless retained for partnership investments and business activities.

8. There is no priority of any one (1) Limited Partner over another with respect to the contributions or compensation by way of income.

9. A Limited Partner may not demand property other than cash in return for its contributions.

The execution of this Certificate by the undersigned 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 General Partner of SIMCHA FAMILY LTD. this 24 day of May, 1995.

Witnesses:

GENERAL PARTNER:

HERBERT W. TRINKLER and
ELAINE TRINKLER, as tenants
by the entirety

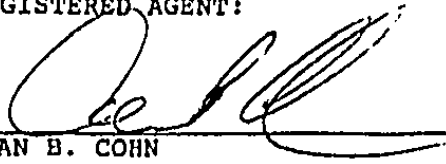
By: Herbert W. Trinkler
HERBERT W. TRINKLER

By: Elaine Trinkler
ELAINE TRINKLER

Having been named as registered agent for SIMCHA FAMILY LTD., 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 registered agent.

REGISTERED AGENT:


ALAN B. COHN

0112940

FILED STATE
SECRETARY OF CORPORATIONS
JAN 26 PM 1:32

AFFIDAVIT OF CAPITAL CONTRIBUTION

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

BEFORE ME, the undersigned, personally appeared HERBERT
W. TRINKLER and ELAINE TRINKLER, as tenants by the entirety,
General Partners of SIMCHA FAMILY LTD., a Florida limited
partnership, who, upon being duly sworn, certifies as follows:

The amount of capital contributions to the
partnership made by all of the Limited Partners is as follows:

\$650,000.00

The amount of additional capital contribution
anticipated to be contributed by each Limited Partner is as
follows:

-0-

FURTHER, AFFIANT SAYETH NAUGHT.

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

GENERAL PARTNER:

HERBERT W. TRINKLER and
ELAINE TRINKLER, as tenants
by the entirety

By: Herbert W. Trinkler
HERBERT W. TRINKLER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 26 PM 3:32

By: Elaine Trinkler
ELAINE TRINKLER

The foregoing Affidavit was subscribed and acknowledged before me by HERBERT W. TRINKLER, who is personally known to me or who has produced N/A as identification and who did take an oath, on this 25 day of May 1995.

[Signature]
Notary Public, State of Florida

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 26 PM 1:28

My Commission Expires:

The foregoing Affidavit was subscribed and acknowledged before me by ELAINE TRINKLER, who is personally known to me or who has produced N/A as identification and who did take an oath, on this 25 day of May 1995.

[Signature]
Notary Public, State of Florida

My Commission Expires:

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tallahassee
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000809

SIMCHA FAMILY LTD.

Making Address
C/O HERBERT W. AND ELINE TRINKLER
16251 GOLF CLUB ROAD, APT. 209
FORT LAUDERDALE FL 33328

Principal Office Address
C/O HERBERT W. AND ELINE TRINKLER
16251 GOLF CLUB ROAD, APT. 209
FORT LAUDERDALE FL 33328

3. Date Formed or Registered to Do Business in
FLORIDA 05/26/1995

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Given
on Record
\$650,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. Filing Number
65 2084758

7. CERTIFICATE OF STATUS REQUIRED
\$5.00 Additional Fee required
if a Certificate of Status is required

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee: \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NOT LESS THAN \$100.25 (52.50 + \$138.75) AND NOT MORE THAN \$578.75 (\$437.50 + \$138.75).
If the amount entered in 5a is greater than amount entered in 5b, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

COHN, ALAN B
C/O ABRAMS, ANTON, ROBBINS, ET AL
2021 TYLER STREET
HOLLYWOOD FL 33022

10. If Change from Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Accepted)
City, State & Zip
City, State & Zip
FL

10a. Pursuant to the provisions of sections 620.1051 and 620.1052, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent I am familiar with and accept the obligations of section 620.1052, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (If not the same for all, then list each partner)	11b. City, State & Zip Code	11c. Registration/ Document Number
TRINKLER, HERBERT W TRINKLER, ELAINE	16251 GOLF CLUB ROAD, 16251 GOLF CLUB ROAD,	FORT LAUDERDALE FL 33 FORT LAUDERDALE FL 33	100001680521 -01/16/96--01044--011 ****576.25 ****576.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I hereby certify that the information supplied with this form is voluntarily furnished and does not apply for the exemption stated in Section 607.103, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 607.103, Florida Statutes, in the event that the information supplied is deemed exempt from public access. I further certify that the information supplied on this general report is true and accurate and that my signature shall have the same legal effect as if my name and address were printed on the report. I am a general partner in the limited partnership, limited liability company, or trust.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Telephone Number

0011798

CR2E003 (6/95)