

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-9173 FAX

800-342-8086



A95000001693

ACCOUNT NO. : 072100000032

REFERENCE : 729546 4656A 4

AUTHORIZATION :

COST LIMIT : PREPAID

ORDER DATE : November 7, 1995

ORDER TIME : 11:33 AM

ORDER NO. : 729546

CUSTOMER NO: 4656A

CUSTOMER: Sheryl Cohen, Legal Assistant
GREENBERG TRAURIG HOFFMAN
LIPOFF ROSEN & QUENTEL, P. A.
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

600001634096
-11/13/95--01041--012
***1837.50 ***1837.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV -7 PM 1:08

DOMESTIC FILING

NAME: FALCON BEACH PARTNERS, LTD.

J. TAX	1750.00
FILING	35.00
R. AGENT FEE	52.50
C. COPY	1837.50
TOTAL	
N. BANK	
BALANCE DUE	
REFUND	

ARTICLES OF INCORPORATION
☒ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Clint D. Fuhrman

EXAMINER'S INITIALS: M/K

11/7/95
RECEIVED

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

FALCON BEACH PARTNERS, LTD.

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1995), and §620.108 of the Florida Statutes, the undersigned, being all of the General Partners of FALCON BEACH PARTNERS, LTD., hereby duly execute and file with the Florida Secretary of State this Certificate of Limited Partnership.

FILED STATE
SECRETARY OF
DIVISION OF CORPORATIONS
95 NOV -7 PM 1:08

1. The name of the limited partnership is FALCON BEACH PARTNERS, LTD.
2. The business address and the mailing address of the limited partnership is c/o: NEIL FAIRMAN, 2100 N. Atlantic Boulevard, Ft. Lauderdale, FL 33305.
3. The name of the registered agent for service of process required by §620.105(2) of the Florida Statutes is:

NEIL FAIRMAN

4. The Florida street address for the registered agent is:

**2100 N. Atlantic Boulevard
Ft. Lauderdale, FL 33305**

5. **Acceptance of Appointment of Registered Agent:**

Having been named the statutory registered agent of FALCON BEACH PARTNERS, LTD., at the place designated in this Certificate of Limited Partnership of FALCON BEACH PARTNERS, LTD., I hereby accept such designation and confirm that I am familiar with and agree to accept the obligations imposed by §620.192 of the Florida Statutes and I agree to comply with the provisions of Florida Law relative to keeping the registered office open.


NEIL FAIRMAN, Registered Agent

Dated: November 6, 1995.

6. The name and business address of the general partner is as follows:

**PLAZA PROPERTIES GROUP, INC.
2100 N. Atlantic Boulevard
Ft. Lauderdale, FL 33305**

K74912

7. The latest date upon which the limited partnership is to dissolve is December 31, 2045.

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 and I hereby execute this Certificate of Limited Partnership on the 6 day of November 1995 in accordance with §620.114(3) of the Florida Statutes.

GENERAL PARTNER:

PLAZA PROPERTIES GROUP, INC., a Florida corporation, general partner

BY: _____

NEIL FAIRMAN, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV -7 PM 1:08

AFFIDAVIT

THE UNDERSIGNED, constituting all of the general partners of **FALCON BEACH PARTNERS, LTD.**, a Florida Limited Partnership, hereby certify as follows:

1. The amount of capital contributions to date of the limited partners is \$ -0-.
2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 1,400,000.00.

FURTHER AFFIANT SAYETH NOT.

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.

PLAZA PROPERTIES GROUP, INC., a Florida corporation, general partner

BY: _____

NEIL FAIRMAN, President

FILE OR 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
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV 29 PM 1:23

A95000001693

1. Name of Limited Partnership

1a. DOCUMENT #

A95000001693

FALCON BEACH PARTNERS, LTD.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

400001653574

2a. New Principal Office, If Applicable

12/05/95-01112-024

****576.25 ****576.25

Suite, Apt. #, etc.

City, State & Zip

3. Date Formed or Registered to Do Business in
FLORIDA

11-07-95

3a. Date of Last Report

None Filed

4. State or Country of Formation

FLORIDA

5a. Capital Contributions as Shown
on Record

\$1,400,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

\$1,400,000.00

6. FET Number

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a 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 607.193, F.S.)

THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, 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

10. If changed, new Registered Agent/Office

NEIL FAIRMAN
2100 N. Atlantic Boulevard
Ft. Lauderdale, FL 33305

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, 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 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

PLAZA PROPERTIES GROUP, INC.

~~201 S. Biscayne Blvd.~~
2100 N. Atlantic Blvd.

~~Miami, FL 33131~~
Ft. Lauderdale, FL
33305

K74912

19R
11/07/95
437.50
138.75
576.25

11/29/95

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

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate, and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

PLAZA PROPERTIES GROUP, INC., general partner

BY: Neil Fairman, President

SIGNATURE

DATE

Neil Fairman, President

Telephone Number (305) 630-8880

Typed or Printed Name of General Partner Signing Form

CR2E003 (6/95)