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To:

Division of Corporations

Fax Number : (850)205-0383

From:

: KRAMER, GREEN, ZUCKERMAN & KAHN, P.A. Account Name

Account Number: 073707002173 : (954)966-2112 Fax Number

: (954)981-1605

FLORIDA LIMITED PARTNERSHIP

OYSTER MANAGEMENT SERVICES, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$140.00



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CERTIFICATE OF LIMITED PARTNERSHIP

Pursuant to Section 620.108 of the Florida Statutes, the following statement is made

- 1. The name of the Limited Partnership is Oyster Management Services, Ltd.
- 2. The address of the office and the name and address of the agent for service of process required to be maintained by Section 620.105 of the Florida Statutes is:

Mitchell F. Green KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A. 4000 Hollywood Blvd., Suite 485 South Hollywood, Florida 33021

3. The name and business address of the General Partner is:

Sasson Moulavi, M.D. 190 Glades Road, Suite E-1 Boca Raton, FL 33432

4. The mailing address and street address for the Limited Partnership is :

190 Glades Road, Suite E-1 Boca Raton, FL 33432

5. The latest date upon which the Limited Partnership is to dissolve is December 31, 2038.

Sasson Moulavi, General Partner

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STATE OF FLORIDA

COUNTY OF BROWARM

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Sasson Moulavi, General Partner of Oyster Management Services, Ltd., to me known to be the person described in and who executed the foregoing Certificate of Limited Partnership and he acknowledged before me that he executed the same. He is personally known to me or produced _______ as identification and he took an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 2/ day of

MARCH , 2002: 3 DW

Dewey L. Owens
Commission #DD142969

Atlantic Bonding Co., Inc.

(seal)

NOTARY PU

K:\MFG\MOULAVI\Oyster Management Services, Ltd\Certificate of Limited Partnership.wpd

LIMITED PARTNERSHIP AFFIDAVIT

STATE OF FLORIDA }
COUNTY OF BARN AND }

Pursuant to Section 620.108 of the Florida Statutes, the following statement is made:

- 1. The undersigned is the sole General Partner of Oyster Management Services, Ltd.
- 2. The amount of the original capital contributions of the Limited Partners is \$990.00. The additional amount anticipated to be contributed by the Limited Partners is \$0.

Sasson Moulavi, General Partner

STATE OF FLORIDA

COUNTY OF BAWANA

SAYETH NAUGHT.

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Sasson Moulavi, General Partner, of Oyster Management Services, Ltd., to me known to be the persons described in and who executed the foregoing Limited Partnership Affidavit and he acknowledged before me that he executed the same. He is personally known to me or who did produce _______ as identification and he did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 2/ day

MARCH 2002-3

Dewey L. Owens
Commission #DD142969
Expires: Aug 16, 2006
Bonded Thru
Atlantic Bonding Co. (no.

NOTARY PUBLIC

(seal)

No.1259 P. 5/5 (((H03000097380 7)))

ACKNOWLEDGMENT OF APPOINTMENT OF REGISTERED AGENT

OYSTER MANAGEMENT SERVICES, LTD.

The undersigned, having been named the Registered Agent for the above Limited Partnership at 4000 Hollywood Boulevard, Suite 485 South, Hollywood, Florida 33021, the undersigned hereby accepts the same and agrees to act in this capacity and agrees to comply with the provisions of Florida law relative to keeping the registered office open.

Dated: March 28 2003.

REGISTERED AGENT:

Mitchell F. Green

KAMEGIMOULAVIOUSTER Management Services, Ltd/Acknowledgment of Appointment of Registered Agent.wpd

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