

DIVISION OF CORPORATIONS 409 EAST GAINES STREET. TALLAHASSEE, FLORIDA 32314 600003059086--7 -12/02/99--01067--010 ***1837.50 ***1837.50__

RE: FAMILY LIMITTED PARTNERSHIP

DEAR SIRS:

AS PER OUR CONVERSATION OF Tuesday, November 30, 1999, I AM SENDING YOU THE FOLLOWING::

- A: CERTIFICATE OF FAMILY LIMITED PARTNERSHIP.
- B: AFFIDAVIT OF FAMILY LIMITED PARTNERSHIP CONTRIBUTION.
- C: CHECK NUMBERED 1983 , FOR THE AMOUNT OF ONE THOUSAND EIGHT HUNDRED AND THIRTY SEVEN DOLLARS AND FIFTY CENTS. $\{$ \$ 1,837.50 $\}$.

IF YOU HAVE ANY QUESTIONS PLEASE FEEL FREE TO DIRECT THEM TO ME.

RESPECTFULLY YOURS.

LOURDES CASTILLO

ATTORNEY AT LAW



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 7, 1999

LOURDES CASTILLO 12773 WEST FOREST HILL BLVD SUITE 1206 WELLINGTON, FL 33414

SUBJECT: U. E. C., F.L.P., LTD. Ref. Number: W99000027894

We have received your document for U. E. C., F.L.P., LTD. and your check(s) totaling \$1837.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the limited liability company.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

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Letter Number: 099A00057514

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CERTIFICATE OF THE FAMILY LIMITED PARTNERSHIP

CERTIFICATE OF FAMILY LIMITED PARTNERSHIP of U. E. C. F.LP., Ltd. We, the undersigned, desiring to form a partnership, pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in 620.101 et seq. of the Florida Statutes, certify:

- 1. The name of the firm under which the Family Limited Partnership is to be conducted is U. E. C., F.L.P., Ltd..
- 2. The character of the business intended to be transacted by the Family Limited Partnership is as follows: REAL ESTATE INVESTMENTS.
- 3. The Street Address of the Principal Office of the Family Limited Partnership is: 12773 WEST FOREST HILL BOULEVARD SUITE 1206, in the City of WELLINGTON, FLORIDA 33414. The Mailing Address of the Family Limited Partnership is: 12773 WEST FOREST HILL BOULEVARD SUITE 1206, in the City of WELLINGTON, FLORIDA 33414.
- 4. The name and place of residence of each General Partner interested in the partnership are as follows:

Name	Place of Residence
ULBICIO CASTILLO	13193 LA MIRADA CIRCLE WELLINGTON, FLORIDA 33414
ESPERANZA CASTILLO	13193 LA MIRADA CIRCLE WELLINGTON, FLORIDA 33414

a: The name and place of residence of each Family Limited Partner interested in the Partnership are as follows:

Name
Place of Residence
ULBICIO CASTILLO
13193 LA MIRADA CIRCLE
WELLINGTON, FLORIDA
33414
ESPERANZA CASTILLO
13193 LA MIRADA CIRCLE
WELLINGTON, FLORIDA
33414

5. The U. E. C., F.L.P., Ltd. Shall exist for an indefinite term of years.

- 6. The time agreed on when the contribution of each Family Limited Partner is to be returned is as follows: DETERMINED BY VOTE of all the GENERAL PARTNERS.
- 7. The share of the profits or any other compensation by way of income which each Family Limited Partner shall receive by reason of HIS or HER contribution is as follows: AS DETERMINED BY VOTE of all the GENERAL PARTNERS.
- 8. The right of the partners to admit additional Family Limited Partners is as follows: AS DETERMINED BY VOTE of all the GENERAL PARTNERS.
- 9. The right of the remaining General Partner to continue the business on the death, retirement, or insanity of a General Partner is as follows: AS DETERMINED BY VOTE of the remaining GENERAL PARTNER.
- 10. The right of a Limited Partner to demand and receive property other than cash in return for his or her contribution is as follows: AS DETERMINED BY VOTE of all the GENERAL PARTNERS.
- 11. The address of the office of the Family Limited Partnership is 12773 WEST FOREST HILL BOULEVARD SUITE 1206 WELLINGTON, FLORIDA 33414. The agent for service of process is LOURDES CASTILLO, whose address is 12773 WEST FOREST HILL BOULEVARD SUITE 1206 WELLINGTON, FLORIDA 33414.
- 12. The name and business address of each General Partner interested in the Partnership are as follows:

Name	Business Address		2 7	3	
ULBICIO CASTILLO	12773 WEST FOREST HILL BLVD. WELLINGTON, FLORIDA 33414	STE	1 <u>2</u> 06	元(33	
ESPERANZA CASTILLO	12773 WEST FOREST HILL BLVD WELLINGTON, FLORIDA 33414	STE	1206 1206 1208 104	≟¶ 8: 54	0

13 The latest date upon which the Family Limited Partnership is to dissolve is INDEFINATE.

IN WITNESS, the undersigned have executed this certificate this 26TH day of OCTOBER 1999.

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General Partner

ESPERANZA (General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

THE UNDERSIGNED CONSTITUTING ALL OF THE GENERAL PARTNERS OF U. E. C., F.L.P., LTD., A FLORIDA FAMILY LIMITED PARTNERSHIP, CERTIFY:

THE AMOUNT OF CAPITAL CONTRIBUTIONS TO DATE OF THE FAMILY LIMITED PARTNERS IS: ONE MILLION NINE HUNDRED THOUSAND DOLLARS, \$ 1,900,000.00

THE TOTAL AMOUNT CONTRIBUTED AND ANTICIPATED TO BE CONTRIBUTED BY THE FAMILY LIMITED PARTNERS AT THIS TIME TOTALS: ONE MILLION NINE HUNDRED THOUSAND DOLLARS, \$ 1,900,000.00

FURTHER AFFIANT SAYETH NOT.

UNDER THE PENALTIES OF PERJURY, I [WE] DECLARE THAT I [WE] HAVE READ THE FOREGOING AND KNOW THE CONTENTS THEREOF AND THAT THE FACTS STATED HEREIN ARE TRUE AND CORRECT.

Ulbicio Castillo Esperanza Ci

GENERAL PARTNER

GENERAL PARTNER

Witness Date

Lourdes Costillo

Print or Type name

Affiant(s) provided a Florida Driver's License as proof of identity and took an oath,

SWORN TO and subscribed before me this 26TH, day of OCTOBER, 1999.

My Commission expires:

MARIA F. RAPP
MY COMMISSION # CC 690788
EXPIRES: February 6, 2002
Bonded Thru Notary Public Underwriters

REGISTERED AGENT

I, LOURDES CASTILLO, ATTORNEY AT LAW, WILL BE THE REGISTERED AGENT FOR U. E. C., F. L. P., L. T. D.

I HEREBY AM FAMILIAR WITH AND DO ACCEPT THE DUTIES AND RESPONSIBILITIES AS THE REGISTERED AGENT FOR SAID FAMILY LIMITED PARTNERSHIP NAMED IN THE CERTIFICATE.

LOURDES CASTILLO

de Capelle

Attorney At Law

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