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To:

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From:

Account Name

: BILZIN, SUMBERG DUNN PRICE & AXELROD LLP

Account Number: 075350000132

: 075350000132 : (305)374-7580

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FLORIDA LIMITED PARTNERSHIP

South Beach City Center Associates, Ltd.

Certificate of Status	<u> </u>
Certified Copy	1
Page Count	04
Estimated Charge	\$1,846.25

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Fax Audit No. H00-,13428

CERTIFICATE OF LIMITED PARTNERSHIP OF SOUTH BEACH CITY CENTER ASSOCIATES, LTD.

The undersigned, desiring to form a limited partnership in accordance with the provisions of the Florida Revised Uniform Limited Partnership Act of 1986, as set forth in Sections 620.101 to 620.192, Florida Statutes, as amended, hereby states as follows:

- 1. The name of the limited partnership is South Beach City Center Associates, Ltd., a Florida limited partnership (the "Limited Partnership").
 - 2. The address of the registered office of the Limited Partnership is:

c/o C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324.

3. The name and address of the agent for service of process required to be maintained by Section 620.105, Florida Statutes, as amended, are:

> C T Corporation System c/o C T Corporation System Plantation, Florida 33324.

1200 South Pine Island Road 4. The name and business address of the sole general partner of the Limited Partnership are:

> SBCC Management, LLC, a Florida limited liability company c/o Atlantic Ocean Realty Corp. 2 Richmond Road Suite 2 JJ

Lido Beach, New York 11581.

5. The mailing address for the Limited Partnership is:

c/o Atlantic Ocean Realty Corp. 2 Richmond Road Suite 2 JJ Lido Beach, New York 11581.

The latest date upon which the Limited Partnership is to dissolve is December 31, 2050.

The execution of this Certificate of Limited Partnership on behalf of the undersigned sole general partner constitutes an affirmation that the facts stated herein are true.

Fax Audit No. 1100-13428

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed in the name and on behalf of the sole general partner of the Limited Partnership as of the 44 day of March, 2000.

SBCC MANAGEMENT, LLC, a Florida limited liability company

James Coppola, Maraging Member

FILED

ON MR 27 M 12: 16

SECRELARY OF STATE

Fax Audit No. H00-, 1-3428

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF New York)) SS:
COUNTY OF Kings)
BEFORE ME, the undersigned authority, a notary public authorized to administer oaths and to take acknowledgments in and for the State and County aforesaid, personally appeared James Coppola, as Managing Member of SBCC Management, LLC, a Florida limited liability company (the "Company"), which company is the sole general partner of South Beach City Center Associates, Ltd., a Florida limited partnership (the "Limited Partnership"), who, after first being duly sworn on oath, deposes and says as follows on behalf of the Company:
 Affiant is the Managing Member and is duly authorized to act on behalf of the Company, which is the sole general partner of the Limited Partnership.
2. As of the date hereof, the partners of the Limited Partnership have contributed to the Limited Partnership an aggregate of \$\frac{10.00 \infty}{10.00 \infty}\$.00 of the total amount of \$\frac{50.000.000}{50.000}.00\$ in capital contributions anticipated to be contributed to the Limited Partnership by its partners.
3. Affiant is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements made in an instrument of this nature. Affiant has read and understands the contents of this Affidavit and the facts stated herein are rue and correct to the best of Affiant's knowledge and belief.
FURTHER AFFIANT SAYS NAUGHT. James Coppola, as Manaling Member and on behalf of SBCC Management, LLC, a Horida limited liability company
THE FOREGOING INSTRUMENT was acknowledged, sworn to and subscribed before me this day of March, 2000, by James Coppola, as Managing Member and on behalf of SBCC Management, LLC, a Florida limited liability company, on behalf of such company; said individual has produced a as identification or is personally known that satisfies your family.
My Commission Expires: 200 Commission Expires: 200 Commission Expires Incard 10, 200 Commission Expires Inca
[NOTARIAL SEAL] Print Name: NOTARY PUBLIC, State of Florida State of
New York New York

Fax Audit No. H00-13428

ACCEPTANCE OF APPOINTMENT

The undersigned acknowledges and accepts its appointment as registered agent of South Beach City Center Associates, Ltd. and agrees to act in that capacity and to comply with the provisions of the Florida Limited Partnership Act relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of Section 620, Florida Statutes.

Date: 3/27/2000

OT CORPORATION SYSTEM

By____ Name: Title:

PETER F. SOUZA ASSISTANT SECRETARY

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SECRETARY OF STATE