

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)922-4003

From:

Account Name : ARNALDO VELEZ, P.A.
Account Number : I19990000259
Phone : (305)461-9499
Fax Number : (305)461-9498

FLORIDA LIMITED PARTNERSHIP
THE SPROUL NAVIA FAMILY LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge.	\$787.50

\$ 717.50

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MARIA C. ARRIOLA VÉLEZ, PA
35 Almeria Avenue
Coral Gables, FL 33134
Tel (305)461-9223 /Fax (305)461-9498

TELECOPY TRANSMITTAL

ATTENTION: Sect of State/Filings

REFERENCE: THE SPROUL NAVIA FAMILY LIMITED
PARTNERHSIP

TELECOPY NUMBER: 1-850-922-4003

FROM: Mari Velez

DATE: May 31, 2000

PAGES FAXED: 6 - including this cover sheet

COMMENTS: Attached for filing:

1. Electronic filing cover sheet;
2. Certificate of Ltd Partnership
w/Acknowledgment of Resident Agent;
3. Affidavit of Capital Contribution;
4. Yours of 5/31/00.

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THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU ANY DISSEMINATION, DISTRIBUTION, OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE. THANK YOU.



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 31, 2000

THE SPROUL NAVIA FAMILY LIMITED PARTNERSHIP

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

The total estimated amount on the cover sheet should be \$717.50.

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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Certificate of Limited Partnership

The undersigned, desiring to form a limited partnership (the "Partnership") pursuant to the provisions of the Florida Uniform Limited Partnership Act, Chapter 620 of the Florida Statutes, as amended, hereby state as follows:

1. The name of the Partnership is THE SPROUL NAVIA FAMILY LIMITED PARTNERSHIP (the "Limited Partnership").

2. The business and mailing address of the Partnership at which the records required to be maintained by the Partnership are kept is 520 Marmore Avenue, Coral Gables, FL 33146.

3. The name of the registered agent, who is a resident of the State of Florida, and a member of the Florida State Bar, is MARIA C. ARRIOLA VÉLEZ, whose post office address is 35 Almeria Avenue, Coral Gables, FL 33134.

4. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2026.

5. Names and street addresses of the General Partners of the Partnership are as follows:

Name	Address
MARIA TERESA SPROUL	520 Marmore Avenue, Coral Gables, FL 33146

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.

IN WITNESS WHEREOF, the undersigned have executed and acknowledged this Certificate of Limited Partnership, effective as of the 25 day of May, 2000.

GENERAL PARTNERS


MARIA TERESA SPROUL

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ACKNOWLEDGMENT BY RESIDENT AGENT

I am familiar with and accept the duties and responsibilities as registered agent for THE SPROUL NAVIA FAMILY LIMITED PARTNERSHIP.

Maria C. Arriola Velez
MARIA C. ARRIOLA VELEZ

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of THE SPROUL NAVIA FAMILY LIMITED PARTNERSHIP, a Florida limited partnership (the "Limited Partnership") certify:

1. The amount of capital contributions to date of the limited partners is \$90,000.00.
2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$90,000.00.

Signed this 25 day of May, 2000.

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.

GENERAL PARTNERS


MARIA TERESA SPROUL

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