



THE UNITED STATES CORPORATION COMPANY

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ACCOUNT NO. : 072100000032

REFERENCE : 717186 11758A

AUTHORIZATION :

Patricia Pizub

COST LIMIT : \$ 140.00

FILED STATE DEPARTMENT OF CORPORATIONS 00 JUN -1 AM 8:13

ORDER DATE : June 1, 2000

ORDER TIME : 2:48 PM

ORDER NO. : 717186-005

300003274233--7

CUSTOMER NO: 11758A

CUSTOMER: Jeffrey S. Wachs, Esq
DOUMAR ALLSWORTH CURTIS CROSS
DOUMAR ALLSWORTH CURTIS CROSS
1177 Southeast Third Avenue

100400031136

Fort Lauderdale, FL 33316

DOMESTIC FILING

NAME: THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP

EFFECTIVE DATE:

(6)

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

Handwritten initials and date: JL 6/1

RECEIVED 00 JUN -1 PM 3:56 DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FL 32310

CERTIFICATE OF LIMITED PARTNERSHIP

OF

THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP

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CLERK OF COURTS
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THE UNDERSIGNED, constituting the General Partner of THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP, a Florida Limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. Name of the Partnership. THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP

2. The address of the office of the Partnership is.

1509 N.E. 6th Street
Fort Lauderdale, FL 33304

3. Name and addresses of the agent for the service of process on the Partnership is.

JEFFREY S. WACHS, ESQ.
1177 S.E. 3rd Avenue
Fort Lauderdale, FL 33316

4. Name and business address of the General Partner is.

DAVID E. PERLOFF
1509 N.E. 6th Street
Fort Lauderdale, FL 33304

5. Mailing address of the Partnership is.

THE PERLOFF ENTERPRISES
LIMITED PARTNERSHIP
c/o David E. Perloff,
General Partner
1509 N.E. 6th Street
Fort Lauderdale, FL 33304

SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUN - 1 AM 8:13

6. Latest date upon which the Partnership will dissolve.

Will be in accordance with Section 620.157
of the Florida Statute, however, no later than
December 31, 2050.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership of THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP, this 18th day of May, 2000.

GENERAL PARTNER(S) :

By: 

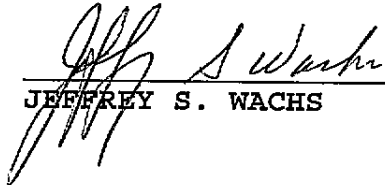
DAVID E. PERLOFF

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

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DEPARTMENT OF CORPORATIONS
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Having been named as Registered Agent for THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP, a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership agree to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:



JEFFREY S. WACHS

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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STATE
DEPARTMENT OF CORPORATIONS
00 JUN - 18 AM 8:13

BEFORE ME, the undersigned authority, personally appeared DAVID E. PERLOFF, the General Partner of THE PERLOFF ENTERPRISES LIMITED PARTNERSHIP, a Florida limited partnership, herein referred to as the "Partnership", who, upon being duly sworn, certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$5,000.00

2. The amount of capital contributions anticipated to be contributed by additional Limited Partners is as follows:

NONE

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

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.

DATED this 18th day of MAY, 2000.



DAVID E. PERLOFF

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

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SWORN TO AND SUBSCRIBED before me, the undersigned authority,
by DAVID E. PERLOFF, who appeared personally before me and took an
oath, who is personally known to me or who produced _____
_____ as identification, on this 18th day of
May, 2000.

Lisa D. Belenson
Notary Public, State of Florida
Print Name: Lisa D. Belenson
My Commission Number: CC765902
My Commission Expires: 8/10/02



Lisa D. Belenson
Commission # CC 765902
Expires AUG. 10, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.