

Division of Corporations

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**A000000001296****Florida Department of State**

Division of Corporations

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Division of Corporations

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From:

Account Name : MURAI, WALD, BIONDO, MORENO, P.A.

Account Number : 076150002103

Phone : (305) 358-5900

Fax Number : (305) 358-4842

**FLORIDA LIMITED PARTNERSHIP****Key Biscayne Offices, Ltd.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$87.50

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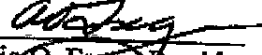
FAX AUDIT NUMBER:  
H00000043640 2**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR KEY BISCAVNE OFFICES LTD**

In accordance with the provisions of Fla. Stat. §620.108, this Certificate of Limited Partnership is executed and filed by the undersigned for the purpose of forming Key Biscayne Offices, Ltd. as a Florida limited partnership.

1. The name of the Limited Partnership is KEY BISCAVNE OFFICES LTD.
2. Its record keeping office, as required under Fla. Stat. §620.105, and at which will be maintained the records required to be maintained under Fla. Stat. §620.106, will be 2299 Douglas Road, 4th Floor, Miami, Florida 33145. The mailing address will be the same as the record keeping office address.
3. Its agent for service of process, as required to be maintained under Fla. Stat. §620.105, will be FIRC Management, Inc., a Florida corporation with an address at 2299 Douglas Road, 4th Floor, Miami, Florida 33145.
4. Its general partners are FIRC Management, Inc. and KB Offices Inc. The business address for both is 2299 Douglas Road, 4th Floor, Miami, Florida 33145. *✓ 651835 / P00000067701*
5. The latest date upon which the limited partnership is to dissolve is December 31, 2030.

This Certificate is executed pursuant to Fla. Stat. §620.114 by FIRC MANAGEMENT, INC., a Florida corporation, and by KB OFFICES INC., a Florida corporation, as all of the general partners of KEY BISCAVNE OFFICES LTD. and its execution constitutes an affirmation under the penalties of perjury that the facts state herein are true.

FIRC MANAGEMENT, INC.

By:   
Antonio O. Fraga, President

KB OFFICES INC.

By:   
Alejandro Sosa, President

**PREPARED BY:**  
M CRISTINA MORENO, ESQUIRE  
MURAI WALD BIONDO & MORENO, P.A.  
25 S.E. 2ND AVENUE, SUITE 900  
MIAMI, FLORIDA 33131  
FLORIDA BAR NO. 259721

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FAX AUDIT NUMBER:  
H00000043640 2**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named as registered agent for KEY BISCAYNE OFFICES, LTD., a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned hereby agrees to accept service of process for said Partnership, to accept the obligations imposed upon such agent by Florida Statute §620.192, and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

Executed this 15<sup>th</sup> day of August, 2000.

REGISTERED AGENT:

FIRC Management, Inc.

By: 

Antonio O. Fraga, President

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STATE OF FLORIDA )  
 ) ss.  
COUNTY OF MIAMI-DADE )

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

THIS DAY before me, the undersigned officer, personally appeared Antonio O. Fraga ("Fraga"), as President of FIRC Management, Inc. ("FIRC"), one of the general partners of KEY BISCAYNE OFFICES LTD., a Florida limited partnership ("Partnership"), and who after being duly sworn, deposes and says:

1. The amount of capital contributions made to the Partnership by the limited partners is \$850.00.
2. The total amount anticipated to be contributed by the limited partners is \$850.00.

FURTHER AFFIANT SAYETH NOT.

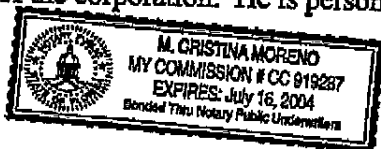
FIRC MANAGEMENT, INC.

By: [Signature]  
Antonio O. Fraga, President

KB OFFICES INC.

By: [Signature]  
Alejandro Sosa, President

SWORN TO AND SUBSCRIBED before me on this 15<sup>th</sup> day of August, 2000, by ANTONIO O. FRAGA, as President of FIRC MANAGEMENT, INC., a Florida corporation, on behalf of the corporation. He is personally known to me.



My Commission Expires:

[Signature]  
NOTARY PUBLIC State of Florida

SWORN TO AND SUBSCRIBED before me on this 15<sup>th</sup> day of August, 2000, by ALEJANDRO SOSA as President of KB OFFICES INC., a Florida corporation, on behalf of the corporation. He is personally known to me.

[Signature]  
NOTARY PUBLIC State of Florida

My Commission Expires:

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