

A000000001374

Paul S. Labiner

Attorney and Counselor at Law

Admitted in NY, NJ and Florida

August 31, 2000

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

MJH

2255 Glades Road
Suite 422A
Boca Raton, FL 33431
Tel (561) 998-2362
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RE: JAVED FAMILY LIMITED PARTNERSHIP

Enclosed is an original and one (1) copy each of the

1. Certificate Of Limited Partnership of the JAVED FAMILY LIMITED PARTNERSHIP
2. Acceptance Of Appointment As Registered Agent;
3. Affidavit Of Capital Contributions; and
4. a check payable to State of Florida for \$1,837.50 which includes:
 - a. \$1750.00 Filing Fee
 - b. 35.00 Designation of Registered Agent
 - c. 52.50 Certified Copy
5. a self-addressed return envelope provided for your convenience.

All documents and correspondence are to be directed to my office. Your time and consideration in this matter are greatly appreciated.

Sincerely,

Paul Labiner
Paul S. Labiner, Esq.

dcs
Enclosures

cc: Mohammad Javed, M.D.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**CERTIFICATE OF LIMITED PARTNERSHIP OF
JAVED FAMILY LIMITED PARTNERSHIP**

a Florida limited partnership

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986), hereby states:

1. The name of the Partnership is:
JAVED FAMILY LIMITED PARTNERSHIP
2. The address of the office of the Partnership is:
490 Cypress Crossing
Wellington, FL 33414
3. The name and address of the agent for service of process on the Partnership is:
MOHAMMAD T. JAVED
490 Cypress Crossing
Wellington, FL 33414
4. The name and business addresses of the general partners are:
MOHAMMAD T. JAVED and FARRAH C. JAVED
490 Cypress Crossing
Wellington, FL 33414
5. The mailing address of the Partnership is:
490 Cypress Crossing
Wellington, FL 33414
6. The latest date upon which the Partnership shall dissolve is August 30, 2010.

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

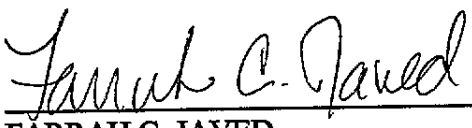
IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the General Partner of the JAVED FAMILY LIMITED PARTNERSHIP this 24 day of August, 2000.

GENERAL PARTNER:



MOHAMMAD T. JAVED
General Partner

GENERAL PARTNER:



FARRAH C. JAVED
General Partner

By: **JAVED FAMILY LIMITED PARTNERSHIP**

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA)
) SS
COUNTY OF PALM BEACH)

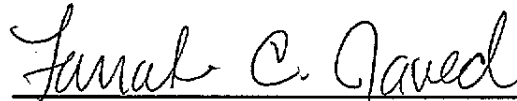
BEFORE ME, the undersigned authority, personally appeared MOHAMMAD T. JAVED and FARRAH C. JAVED, of 490 Cypress Crossing, General Partners of the JAVED FAMILY LIMITED PARTNERSHIP (the "Partnership"), who, upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by the limited partner(s) is/are, in the aggregate, Two-Hundred, Fifty-Thousand and No/100 (\$ 250,000) Dollars.
2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

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.



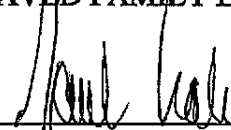
MOHAMMAD T. JAVED, General Partner



FARRAH C. JAVED, General Partner

Date: August 24, 2000

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared MOHAMMAD T. JAVED and FARRAH C. JAVED., who are known to me and known by me to be the persons who executed the foregoing Affidavit of Capital Contributions, and who acknowledged to me and before me that they executed this Affidavit as General Partners of the JAVED FAMILY LIMITED PARTNERSHIP, this 24 day of August, 2000



NOTARY PUBLIC, State of Florida

MOHAMMAD T. JAVED is Personally known ☒
OR Produced Identification _____

FARRAH C. JAVED is Personally known ☒
OR Produced Identification _____

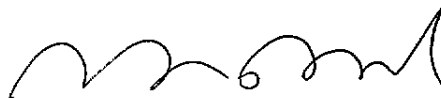


PAUL LABINER
My Comm Exp 4/03/2001
Bonded by Service Ins.
No. CC635847
(☒ Personally Known () Other I.D.)

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for the JAVED FAMILY LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I hereby agree to act in that capacity, and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:

A handwritten signature in black ink, appearing to read 'Mohammad T. Javed', written over a horizontal line.

MOHAMMAD T. JAVED