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EDWARD HEILBRONNER  
1938 - 2000

MJH

\* BOARD CERTIFIED IN REAL ESTATE

September 7, 2000

State of Florida  
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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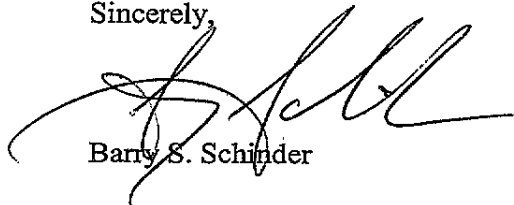
Re: Kwartner Family Partnership, Ltd.

To Whom It May Concern:

Enclosed are an original and one copy of Certificate of Limited Partnership and Affidavit of Capital Contributions for Kwartner Family Partnership, Ltd., and a check for \$1,837.50 to cover the filing fee, registered agent designation fee and the certified copy fee. Please send to me a certified copy of the filed Certificate of Limited Partnership.

If you have any questions, please do not hesitate to call me.

Sincerely,



Barry S. Schinder

BSS:sy  
Enclosures

cc: Mr. Alan Kwartner (w/encl.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 SEP 11 PM 3:31

**CERTIFICATE OF LIMITED PARTNERSHIP**

**OF**

**KWARTNER FAMILY PARTNERSHIP, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 SEP 11 PM 3:31

The undersigned general partner, desiring to form a limited partnership pursuant to the laws of the State of Florida, certifies as follows:

1. **Name of Limited Partnership.** The name of the limited partnership is KWARTNER FAMILY PARTNERSHIP, LTD.
2. **Office for Maintenance of Business Records.** The address of the office at which the records of the limited partnership will be kept is 1280 N.W. 100th Way, Plantation, FL 33323.
3. **Agent for Service of Process.** The name and address of the partnership's agent for service of process in Florida is Richard B. Sabra, Esq., c/o Atkinson, Diner, Stone, Mankuta & Ploucha, P.A., 1946 Tyler Street, Hollywood, Florida 33020.
4. **General Partners.** The name and business address of the General Partner in the Limited Partnership is as follows:

<u>Name</u>	<u>Address</u>
Irene Kwartner	1280 N.W. 100th Way Plantation, FL 33323

5. **Mailing Address of Partnership.** The mailing address of the limited partnership is 1280 N.W. 100th Way, Plantation, FL 33323.
6. **Latest Date of Dissolution.** The latest date on which the limited partnership is to dissolve is December 31, 2049.

Under penalties of perjury, I declare that I have read the foregoing and know the contents thereto, and that the facts stated herein are true and correct.

Dated as of this 6th day of September, 2000.

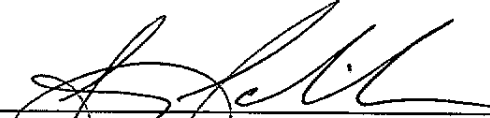

**GENERAL PARTNER**

Irene Kwartner  
IRENE KWARTNER

STATE OF FLORIDA       )  
                                      ) SS:  
COUNTY OF BROWARD    )

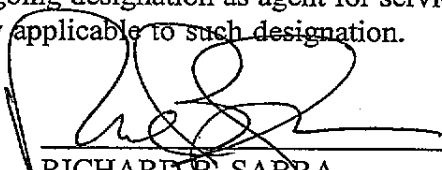
The foregoing instrument was acknowledged before me this 6th day of September, 2000, by IRENE KWARTNER, as General Partner of KWARTNER FAMILY PARTNERSHIP, LTD., a Florida limited partnership, who ☐ is personally known to me or who ☒ has produced a ~~driver license~~ as identification.

FL. ID Card

  
\_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires: \_\_\_\_\_  
My Commission Number: 

\_\_\_\_\_  
(Printed, typed or stamped commissioned  
name of Notary Public)

The undersigned hereby accepts the foregoing designation as agent for service of process and agrees to comply with the provisions of law applicable to such designation.

  
\_\_\_\_\_  
RICHARD B. SABRA

## AFFIDAVIT OF CAPITAL CONTRIBUTION

The undersigned, constituting the sole General Partner of KWARTNER FAMILY PARTNERSHIP, LTD., declares that the capital contributions of all the Limited Partners in the partnership are as follows:

1. The Limited Partners have made capital contributions in the following amounts:

<u>Name</u>	<u>Amount of Contribution</u>
IRENE KWARTNER	\$5,000,000
ALAN KWARTNER	\$100
RHODA KWARTNER	\$100
MICHELE MEYER	\$100
MELVIN MEYER	\$100
MOLLINE CASSUTO	\$100
BENJAMIN CASSUTO	\$100

2. The total amount contributed and anticipated to be contributed by the Limited Partners at this time totals \$5,000,600.

Signed this 6 day of September, 2000.

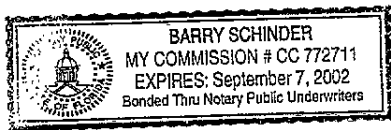
Further Affiant Sayeth Not.

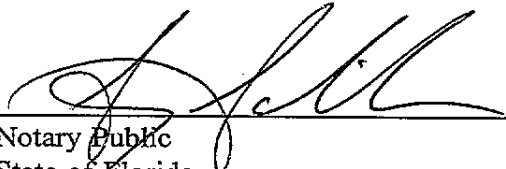
Under penalties of perjury, I declare that I have read the foregoing and know the contents thereof, and that the facts stated herein are true and correct.

  
IRENE KWARTNER

STATE OF FLORIDA       )  
                                      ) SS:  
COUNTY OF BROWARD    )

The foregoing instrument was acknowledged before me this 6<sup>th</sup> day of September, 2000, by IRENE KWARTNER, as General Partner of KWARTNER FAMILY PARTNERSHIP, LTD., a Florida limited partnership, who ☐ is personally known to me or who ☒ has produced a ~~driver license~~ FL. ID CARD as identification.



  
\_\_\_\_\_  
Notary Public  
State of Florida  
My Commission Expires:  
My Commission Expires:



\_\_\_\_\_  
(Printed, typed or stamped commissioned  
name of Notary Public)