ACCOUNT NO. : 072100000032

REFERENCE :

840552

4300A

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 22, 2000_

ORDER TIME : 1:52 PM

ORDER NO. : 840552-005

CUSTOMER NO: _ 4300A

800003402108--1

-09/25/00--01005-012 ***1785.00 ***1785.00

CUSTOMER: Beth M. Moskowitz, Legal Asst

Weiner Cummings & Vittoria, P.

Α.

4th Floor

1428 Brickell Avenue Miami, FL 33131

DOMESTIC FILING

NAME:

OKIN FAMILY PARTNERSHIP, L.P.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHI ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 1133 EXAMINER'S INITIALS:



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 26, 2000

JEANINE REYNOLDS CSC TALLHASSEE, FL

SUBJECT: OKIN FAMILY PARTNERSHIP, L.P.

Ref. Number: W00000023297

We have received your document for OKIN FAMILY PARTNERSHIP, L. . and your check(s) totaling \$1785.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida limited partnerships cannot use the "L.P." suffix. Please use LTD., LIMITED, or LIMITED PARTNERSHIP.

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) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 400A00050379

DEPARTMENT OF STATE O

CERTIFICATE OF LIMITED PARTNERSHIP OF

OKIN FAMILY LIMITED PARTNERSHIP

THE UNDERSIGNED, General Partner desiring to form a Limited Partnership pursuant to Florida Revised Uniform Limited Partnership Act as set forth in Part I, Chapter 620 of the Florida Statutes, hereby states the following:

- 1. The name of the limited partnership is OKIN FAMILY LIMITED PARTNERSHIP.
- 2. The address of the office of the Partnership is 2862 Irma Lake Drive, West Palm Beach, FL 33411.
- 3. The name and address of the agent for services of process of the Partnership is Paul M. Cummings, Weiner Cummings & Vittoria, 1428 Brickell Avenue, Suite 400, Miami, Florida 33131.
- 4. The name and business address of the sole General Partner is as follows: R.D.K.O., Inc., 2862 Irma Lake Drive, West Palm Beach, FL 33411.

5.	The mailing address of the Partnership is 2862 Irma Lake Drive, West Palm Beach,		
FL 33411.	The Latest date upon which the Limited Pardissolved is December 31, 2047. ITNESS WHEREOF, the undersigned has executed this Certif	rtnership is to be	
, IN W	ITNESS WHEREOF, the undersigned has executed this Certif	icate this <u>4</u> day of	
may	, 2000.		
ATTEST:	GENERAL PARTNER R.D.K.O., Inc.	FO SEP	
	By: Reland Okik	LED 25 P ASSEE, ASSEE,	

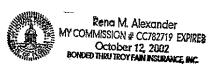
STATE OF FLORIDA)
)ss:
COUNTY OF PAIM BEACH)

Robert Okin

The foregoing instrument was acknowledged before me by ROBERT OKIN, who is the President of R.D.K.O., Inc., who is personally known to me, or who produced ______ as identification, this 9th day of ______, 2000.

Meno M Clerhod

Notary Public - State of Florida



AFFIDAVIT OF CAPITAL CONTRIBUTIONS

THE UNDERSIGNED, Robert Okin, President of R.D.K.O., INC., being the sole General Partner of OKIN FAMILY LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership"), certifies that the total initial amount of capital contributions and the anticipated amount of capital contributions by the limited partners of the Partnership is as follows:

INITIAL CONTRIBUTION	ANTICIPATED CONTRIBUTION		
<u>§ 15,00</u> 0	\$15,000		
\$1,455,000 \$15,000 \$15,000	\$1,455,000 \$15,000 \$15,000		
The total amount contributed and anticipated to be contributed by the Limited Partners is \$1,485,000. FURTHER, AFFIANT SAYETH NOT.			
R.D.K.O., INC. By: Kdard M.	00 SEP. SECRET		
- S	E.FLORI		
The foregoing instrument was acknowledged before me by R.D.K.O., INC., General Partner by ROBERT OKIN, who is personally known to me, or who produced type of i.d.) as identification, this // // // // // // // // // // // // //			
	S 15,000 \$1,455,000 \$15,000 \$15,000 \$15,000 ed and anticipated to 485,000. GAYETH NOT. GENERAL PARTNER R.D.K.O., INC. By: At M. Robert Okin, Presider Robert Okin, Presider S Remain M. October Management of the produced Mypeone in the		

2454affi.002



Rena M. Alexander
MY COMMISSION # CC782719 EXPIRES
October 12, 2002
BONDED THRU TROY FAIN INSURANCE, INC.

ACCEPTANCE AND APPOINTMENT AS RESIDENT AGENT

THE UNDERSIGNED, having been named as resident agent for OKIN FAMILY LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, does on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

RESIDENT AGENT:

PAUL M. CUMMINGS
WEINER, CUMMINGS & VITTORIA

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OO SEP 25 PM 4: 01
SECRETARY OF STATE
SECRETARY SEE, FLORIDA