

# A01 000000419

*Paul S. Labiner*

*Attorney and Counselor at Law*

*Admitted in NY, NJ and Florida*

March 16, 2001

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

2255 Glades Road  
Suite 422-A  
Boca Raton, FL 33431  
Tel (561) 998-2362  
Fax (561) 998-2358

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-03/22/01--01040--007  
\*\*\*1837.50 \*\*\*1837.50

RE: ORTSAC FAMILY LIMITED PARTNERSHIP

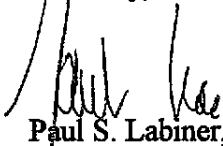
Enclosed is an original and one (1) copy each of the

1. Certificate Of Limited Partnership of the ORTSAC FAMILY LIMITED PARTNERSHIP;
2. Acceptance Of Appointment As Registered Agent;
3. Affidavit Of Capital Contributions; and
4. a check payable to "Department of State" 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.

FILED  
MAR 22 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


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

Sincerely,

  
Paul S. Labiner, Esq.

dcs  
Enclosures

cc: Robert & Sophia Castro

A01-419  


**CERTIFICATE OF LIMITED PARTNERSHIP OF  
ORTSAC 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:  
ORTSAC FAMILY LIMITED PARTNERSHIP
2. The address of the office of the Partnership is:  
2965 Wentworth  
Weston, FL 33332
3. The name and address of the agent for service of process on the Partnership is:  
ROBERT T. CASTRO  
2965 Wentworth  
Weston, FL 33332
4. The names and business address of the general partners are:  
SOPHIA C. CASTRO & ROBERT T. CASTRO  
2965 Wentworth  
Weston, FL 33332
5. The mailing address of the Partnership is:  
2965 Wentworth  
Weston, FL 33332
6. The latest date upon which the Partnership shall dissolve is March 15, 2011.


The execution of this certificate by the undersigned General Partners 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 Partners of the ORTSAC FAMILY LIMITED PARTNERSHIP this 13 day of March, 2001.

GENERAL PARTNER:

  
\_\_\_\_\_  
ROBERT T. CASTRO, General Partner

GENERAL PARTNER:

  
\_\_\_\_\_  
SOPHIA C. CASTRO, General Partner

By: ORTSAC FAMILY LIMITED PARTNERSHIP

FILED  
01 MAR 22 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA                     )  
  ) SS:  
COUNTY OF PALM BEACH )

**BEFORE ME**, the undersigned authority, personally appeared SOPHIA C. CASTRO & ROBERT T. CASTRO, General Partners, of 2965 Wentworth, Weston, Florida 33332, general partners of the ORTSAC 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, ONE MILLION and No/100 (\$ 1,000,000 ) 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.

GENERAL PARTNER:

  
\_\_\_\_\_  
ROBERT T. CASTRO, General Partner

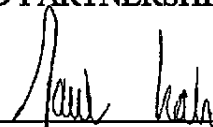
GENERAL PARTNER:

  
\_\_\_\_\_  
SOPHIA C. CASTRO, General Partner

FILED  
01 MAR 22 PM 5:00  
NOTARY PUBLIC  
STATE OF FLORIDA

Date: March 13

**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 SOPHIA C. CASTRO & ROBERT T. CASTRO, 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 ORTSAC FAMILY LIMITED PARTNERSHIP, this 13 day of March, 2001.

  
\_\_\_\_\_  
NOTARY PUBLIC, State of Florida



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

ROBERT T. CASTRO is Personally known ☒  
OR Produced Identification \_\_\_\_\_

SOPHIA C. CASTRO is Personally known ☒  
OR Produced Identification \_\_\_\_\_

## ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for the ORTSAC 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:

  
ROBERT T. CASTRO

FILED

01 MAR 22 PM 5:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA