

A01000001124

Requester's Name: _____
Address: 315 So. Calhoun Street
City/State/Zip: _____ Phone #: 425-5675

FILED
01 AUG 23 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Country Walk Plaza Ltd
(Corporation Name) (Document #)

2. LP-87.50
(Corporation Name) (Document #)

3. CENT 113.75
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

01 AUG 23 AM 11:12
DIVISION OF CORPORATION

RECEIVED

- ☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certified Copy (2) ☒ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

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-08/23/01--01052--016

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OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

BR

Examiner's Initials

**CERTIFICATE OF LIMITED PARTNERSHIP OF
COUNTRY WALK PLAZA, LTD.**

The undersigned general partner represents that it has formed a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (the "Act"), and that it has executed this Certificate of Limited Partnership pursuant to the foregoing Act and states herein as follows:

I. Name

The name of the limited partnership is **COUNTRY WALK PLAZA, LTD.**

II. Records of the Partnership

The address of the office in Florida at which place the records of the partnership shall be maintained is as follows:

5446 N. Bay Road
Miami Beach, Florida 33140

III. Registered Agent

The address of the registered office of the partnership and the name of the registered agent for service of process located at that office is as follows:

Saul Glottmann
5446 N. Bay Road
Miami Beach, Florida 33140

IV. General Partner

The name and business address of the general partner of the partnership is as follows:

COUNTRY WALK PLAZA, INC.
5446 N. Bay Road
Miami Beach, Florida 33140

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STATE
FLORIDA

V. Mailing Address

The mailing address of the partnership is as follows:

*5446 N. Bay Road
Miami Beach, Florida 33140*

VI. Dissolution

The latest date on which the partnership is to dissolve is December 31, 2101.

WHEREFORE, the undersigned, COUNTRY WALK PLAZA, LTD., the general partner of the partnership, has executed this Certificate of Limited Partnership on the 16 day of August, 2001.

*COUNTRY WALK PLAZA, INC.,
as general partner*

*By: 
Name: Saul Glottmann
Title: President*

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned constituting the general partner of **COUNTRY WALK PLAZA, LTD.**, a Florida limited partnership, certifies:

The amount of capital contributions to date of the limited partners is \$1,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 1,000.00.

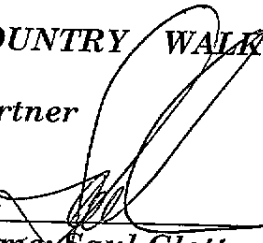
Further affiant sayeth not.

Under the 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.

Dated this 6 day of August, 2001.

general

COUNTRY WALK PLAZA, INC., as
partner

By: 
Name: Saul Glottmann
Title: President

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CLERK OF DISTRICT COURT
STATE OF FLORIDA
JAIL

**LIMITED PARTNERSHIP REGISTERED AGENT DESIGNATION
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED.**

In compliance with Section 620.105, Florida Statutes, the following is submitted: COUNTRY WALK PLAZA, LTD. with its place of business at 5446 N. Bay Road, Miami Beach, Florida 33140 has named Saul Glottmann at 5446 N. Bay Road, Miami Beach, Florida 33140 as its agent to accept service of process within Florida.

COUNTRY WALK PLAZA, LTD.
as general partner

By: 
Name: Saul Glottmann
Title: President

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TALLAHASSEE, FLORIDA

Having been named to accept Service of Process for the above stated limited partnership, at the place designated in this certificate, the undersigned hereby agrees to act in this capacity, and the undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and accepts the duties and obligations of section 620.192, Florida Statutes.

Dated this 16 day of August, 2001.

By: 
Name: Saul Glottmann
Title: Registered Agent