

CT CORPORATION SYSTEM

A01000001284

CORPORATION(S) NAME

Park Plaza I Limited Partnership

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FILED
01 SEP 21 PM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Photocopies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 SEP 14 PM 2:55
NO. 1
TO AG. SUFFICIENT
SUFFICIENCY OF FILING

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

9/14/01

Order#: 0

700004589127--5

09/17/01--01002--010

Ref#: ***1785.00 ***1785.00

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 14, 2001

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: PARK PLAZA I LIMITED PARTNERSHIP
Ref. Number: W01000021440

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

Please note that we have RETAINED your \$1,785.00 payment.

The certificate of Limited Partnership identifies the Partnership's MAILING ADDRESS, which is required. But it must also state the address of the Partnership's principal office.

ALSO, the AFFIDAVIT is supposed to state two money amounts. It is supposed to state the amount of limited partner contributions to date. And then it is supposed to state the total amount contributed and anticipated to be contributed by the limited partners.

We are enclosing our limited partnership application form, which you may wish to use as a guide.

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) 245-6914.

Buck Kohr
Corporate Specialist

Letter Number: 601A0005179

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CERTIFICATE OF LIMITED PARTNERSHIP

1. Park Plaza I Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 50 Cocoanut Row, Palm Beach, Florida 33480
(Business address of Limited Partnership)
3. Robert I. Spiegel
(Name of Registered Agent for Service of Process)
4. 50 Cocoanut Row, Palm Beach, Florida 33480
(Florida street address for Registered Agent)
5. *Robert Spiegel*
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. P.O. Box 11, Palm Beach, Florida 33480
(Mailing Address of the Limited Partnership)

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TALLAHASSEE
SECRETARY OF STATE
FLORIDA

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/2050
8. Name(s) of general partner(s): _____ Street address: _____

SSIL, INC.

132 Sheppard Avenue West,

• P18372

Suite 200, North York, Ontario

M2N 1M5

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

Signed this 17 day of September, 2001

Signature of all general partners:
SSIL, INC.

per;

General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of Park Plaza I
Limited Partnership

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 2,535,821.00

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 2,535,821.00

Signed this 17 day of September, 2001

FURTHER AFFLIANT SAYETH NOT.

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

SSIL, INC.

Per:

General Partner

General Partner

General Partner

General Partner

General Partner

General Partner