

A01000001462

LAW OFFICES
J. WALTER McCRORY
PROFESSIONAL ASSOCIATION
SUITE 200
COLEE HAMMOCK EXECUTIVE PLAZA
1512 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FLORIDA 33301
TELEPHONE (954) 462-6124
FACSIMILE (954) 761-8925

October 29, 2001

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: 6681, Ltd.

000004659410--7
-10/30/01--01067--005
***1459.50 ***1459.50

Dear Sir/Madam:

This office represents 6681, Ltd., a Florida limited partnership.

Enclosed please find originals and one copy of the following:

1. Certificate of Limited Partnership;
2. Affidavit of Capital Contribution; and
3. Designation of Registered Agent.

A check is enclosed in the amount of \$1,459.50 in payment of:

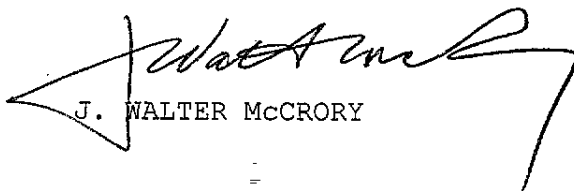
Capital Contribution fee	
\$196,000 x \$7/\$1,000	\$1,372.00
Registered Agent Designation	35.00
Certified Copy	52.50
TOTAL	\$1,459.50

FILED
OCT 30 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please cause the enclosed to be filed after which, please forward evidence of same to me at the letterhead address.

Thank you for your assistance in this matter. If you need any additional information, please advise.

Sincerely,


J. WALTER McCRORY

A01-1462



JWM/ljl

Enclosures

cc: 6681, Ltd.

Attn: Mr. David Fee

CERTIFICATE OF LIMITED PARTNERSHIP

The Partners, being duly sworn, do hereby certify that the following is their Limited Partnership Certificate.

I. The name of the Limited Partnership is 6681, Ltd.

II. The principal office, place of business, and mailing address of the Limited Partnership is 6351 N. W. 28th Way, Suite A, Fort Lauderdale, FL 33309.

III. The name and address of the agent for service of process is:

J. Walter McCrory, P. A.
1512 East Broward Boulevard
Suite 200
Fort Lauderdale, FL 33301

IV. The name and business address of the General Partner is as follows:

DHF Corp., a Florida corporation
6351 N. W. 28th Way, Suite A
Fort Lauderdale, FL 33309

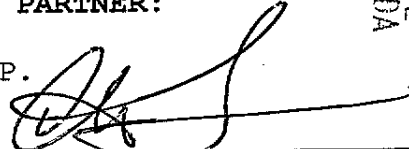
947-23871

V. The Limited Partnership shall continue for twenty (20) years from the date of formation, or the earlier occurrence of an act or events specified in the Limited Partnership Agreement as one effecting dissolution.

IN WITNESS WHEREOF, the Partners have executed this Certificate, under oath, this 24 day of OCTOBER 2001.

GENERAL PARTNER:

DHF CORP.

By: 

David H. Fee, President

LIMITED PARTNERS


David H. Fee

FILED
OCT 30 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP

LIMITED PARTNERS (Cont'd.)

Michael W. Fee

Jerry Ligon

Robert Gordon

Steve Lewis

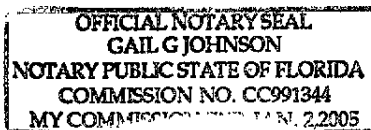
STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared DAVID H.
FEE, as President of DHF Corp., ☒ who is personally known to me
or ☐ who has produced _____ as
identification and who did/did not take an oath.

Gail G Johnson

NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:



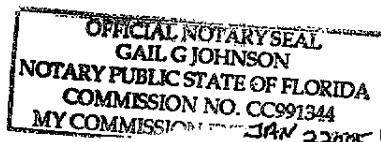
STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared DAVID H.
FEE, ☒ who is personally known to me or ☐ who has produced
_____ as identification and who
did/did not take an oath.

Gail G Johnson

NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:



FILED
01 OCT 30 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

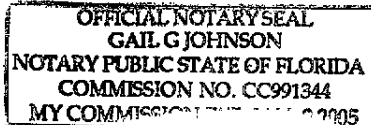
CERTIFICATE OF LIMITED PARTNERSHIP

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared MICHAEL W.
FEE, ☒ who is personally known to me or ☐ who has produced
as identification and who
did/did not take an oath.

Gail G Johnson
NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:

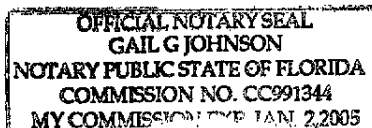


STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared JERRY
LIGON, ☒ who is personally known to me or ☐ who has produced
as identification and who
did/did not take an oath.

Gail G Johnson
NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:

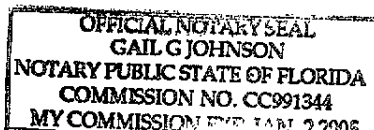


STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared ROBERT
GORDON, ☒ who is personally known to me or ☐ who has produced
as identification and who
did/did not take an oath.

Gail G Johnson
NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:



FILED
OCT 30 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

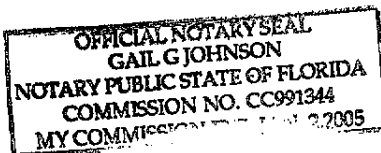
CERTIFICATE OF LIMITED PARTNERSHIP

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 24 day of October, 2001,
before me, an officer duly authorized in the State and County
aforesaid to take acknowledgments, personally appeared STEVE
LEWIS, ☒ who is personally known to me or ☐ who has produced
as identification and who
did/did not take an oath.

Gail G Johnson
NOTARY PUBLIC
State of Florida

MY COMMISSION EXPIRES:



FILED
01 OCT 30 PM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTION
OF THE LIMITED PARTNERS OF
6681, LTD.**

STATE OF FLORIDA
COUNTY OF BROWARD

The undersigned affiant, being first duly sworn, deposes and says:

1. This affidavit is being filed pursuant to Florida Statutes, Section 620.108, in connection with the formation of a limited partnership under the name 6681, Ltd.
2. Pursuant to the Florida Revised Uniform Limited Partnership Act (1986), a Certificate of Limited Partnership of 6681, Ltd., has been submitted for filing with the Secretary of State simultaneously with this affidavit.
3. The general partner of the limited partnership is DHF Corp., a Florida corporation.
4. The limited partners have contributed Nine Hundred Ninety Dollars (\$990.00) to the capital of the limited partnership.
5. It is anticipated that the limited partners will contribute an additional ONE HUNDRED NINETY SIX THOUSAND Dollars (\$ 196,000.) to the capital of the limited partnership.

GENERAL PARTNER:

DHF Corp.
a Florida corporation

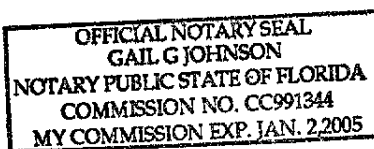
By: [Signature]
David H. Fee
President

FILED
01 OCT 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I HEREBY CERTIFY that on this 24 day of October, 2001, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared DAVID H. FEE, President, DHF Corp., ☒ who is personally known to me or ☐ who has produced _____ as identification.

Gail G Johnson
NOTARY PUBLIC, State of Florida

MY COMMISSION EXPIRES:



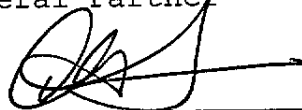
**CERTIFICATE DESIGNATING PLACE OF BUSINESS,
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In compliance with Section 48.061, Florida Statutes, the following is submitted:

First, that 6681, Ltd., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 6351 N.W. 28th Way, Suite A, Fort Lauderdale, FL 33309, has named J. Walter McCrory, located at 1512 E. Broward Boulevard, Suite 200, Fort Lauderdale, Florida 33301, as its agent to accept service of process within Florida.

6681, Ltd.

BY: DHF Corp.
a Florida corporation,
General Partner



David H. Fee, President

Date: 10/15/01

Having been named to accept service of process for the above stated limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.



J. WALTER MCCRORY

Date: 10-29-01

FILED
01 OCT 30 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA