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DATE: 11-16-01

NAME: SJG GROUP LP.

LP-35

600004685526--2  
-11/16/01--01017--025  
\*\*\*1802.50 \*\*\*1802.50

TYPE OF FILING: CERTIFICATE OF LIMITED PARTNERSHIP

COST: CHECK ATTACHED FOR \$1,802.50

600004685526--2  
-11/28/01--01025--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RETURN: CERTIFIED COPY

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DIVISION OF CORPORATION

AUTHORIZATION: ABBIE/PAUL HODGE

BK

**CERTIFICATE OF LIMITED PARTNERSHIP OF  
SJG GROUP LIMITED PARTNERSHIP**

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TALLAHASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited partnership pursuant to Section 620.408 of the Florida Revised Uniform Limited Partnership Act (1986), hereby states the following:

1. The name of the Partnership is SJG GROUP LIMITED PARTNERSHIP.
2. The address of the office of the Partnership is 13808 Via Vittoria, Delray Beach, Florida 33446.
3. The name and address of the agent for service of process on the Partnership is HCRM Corp., 2200 Corporate Boulevard NW, Suite 401, Boca Raton, Florida 33431.
4. The name and business address of the corporate General Partner is as follows:  
SJG Management, Inc.  
13808 Via Vittoria  
Delray Beach, Florida 33446. 001000086214
5. The mailing address of the Partnership is: 13808 Via Vittoria, Delray Beach, Florida 33446.
6. The latest date upon which the Partnership shall dissolve is December 31, 2051.
7. The effective date of this Certificate of Limited Partnership shall be upon filing with the Florida Department of State.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of SJG GROUP LIMITED PARTNERSHIP this 14<sup>th</sup> day of November, 2001.

GENERAL PARTNER

SJG Management, Inc.

By: Samuel Jacob Grossman

Name: Samuel Jacob Grossman

Its: President

**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named as registered agent for SJG GROUP LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I, 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.

REGISTERED AGENT

HCRM Corp.

By: Lawrence J. Miller, V.P.

LAWRENCE J. MILLER, Vice-President

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

**BEFORE ME**, the undersigned authority, personally appeared **SAMUEL JACOB GROSSMAN**, as president of the General Partner of **SJG GROUP LIMITED PARTNERSHIP**, a Florida limited partnership (the "Partnership"), who upon being fully sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by each Limited Partner is as follows:

SAMUEL JACOB GROSSMAN \$0  
13808 Via Vittoria  
Delray Beach, Florida 33446

2. The amount of additional capital contributions anticipated to be contributed by each Limited Partner is as follows:

SAMUEL JACOB GROSSMAN  
13808 Via Vittorria  
Delray Beach, Florida 33446

FURTHER AFFLANT SAITH NAUGHT.

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:

Dated: November 14, 2001

SJG Management, Inc.

By: Samuel Jacob  
Name: Samuel Jacob Grossman  
Its: President

STATE OF FLORIDA               )  
COUNTY OF PALM BEACH      ) SS:

The foregoing instrument was acknowledged before me this 14th day of November, 2001, by SAMUEL JACOB GROSSMAN, as President of SJG Management, Inc, the General Partner of the Partnership, who is personally known to me or has produced \_\_\_\_\_ as identification.

Notary Public, State of Florida

Print/Type or Stamp Notary Name

Commission No:

My Commission Expires:

