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From: Account Name : GREENSPOON MARDER HIRSCHFELD RAFKIN ROSS & BERGER, P.  
Account Number : 076064003722  
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Fax Number : (954) 771-9264

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**FLORIDA LIMITED PARTNERSHIP**  
**THE FRANKEL FAMILY LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$87.50

**CERTIFICATE OF LIMITED PARTNERSHIP OF  
THE FRANKEL FAMILY LIMITED PARTNERSHIP  
a Florida limited partnership**

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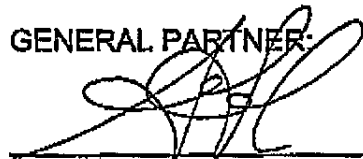
The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law, as set forth in Section 620.108 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is The Frankel Family Limited Partnership.
2. The address of the office of the Partnership is 3660 Washington Lane, Cooper City, Florida 33026.
3. The name and address of the Agent for service of process on the Partnership is Steven A. Frankel, 3660 Washington Lane, Cooper City, Florida 33026.
4. The name and business address of the General Partner is Steven A. Frankel, 3660 Washington Lane, Cooper City, Florida 33026.
5. The mailing address of the Partnership is 3660 Washington Lane, Cooper City, Florida 33026.
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 State of Florida, Department of State.
8. A conveyance or encumbrance of real property held in the Partnership name, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by the General Partner.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Whereof, this Certificate of Limited Partnership has been executed by the General Partner of The Frankel Family Limited Partnership on this 5<sup>th</sup> day of December, 2001.

GENERAL PARTNER:



Steven A. Frankel

ACCEPTANCE AND APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for The Frankel Family Limited Partnership, a Florida limited 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:

By: \_\_\_\_\_

Steven A. Frankel

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STATE OF FLORIDA     )  
  ) SS:  
COUNTY OF BROWARD )

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

Before me, the undersigned personally appeared Steven A. Frankel, constituting the general partner of The Frankel Family Limited Partnership, a Florida limited partnership, hereinafter referred to as the "Partnership. The undersigned, who upon being duly sworn, certify the following:

1. The amount of capital contributions to the Partnership made by the limited partners is: \$-0-.

2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$1,000 .00.

FURTHER AFFIANT SAYETH NOT.

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.

*Gregory J. Bloch*

Notary Public, State of Florida

Date: 12-5-2001

