

# AD20000000148

JOEL REINSTEIN

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January 24, 2002

AIRBORNE

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

100004798221--9  
-01/25/02--01066--001  
\*\*\*1785.00 \*\*\*1785.00

Re: The Florence F. Wolfson Family Limited Partnership

Dear Sir:

Enclosed please find the following documents for filing regarding the above limited partnership:

1. Certificate of Limited Partnership.
2. Affidavit of Capital Contributions.
3. Acceptance of Appointment as Registered Agent.

Also enclosed is a check in the amount of \$1,785, representing the maximum filing fee of \$1,750, and the \$35 registered agent fee.

We have also enclosed a copy of each of the above documents. Please return a stamped filed copy to the undersigned in the envelope provided.

Please contact the undersigned if you have any questions.

Thank you for your cooperation in this matter.

Sincerely,

Joel Reinstein

JR/wsm

Enclosures

cc: Mrs. Florence F. Wolfson  
Mr. Gerald P. Wolfson  
Mrs. Marilyn W. Armel  
Alan Rothberg, C.P.A.

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FILED  
02 JAN 25 PM 2:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP  
THE FLORENCE WOLFSON FAMILY LIMITED PARTNERSHIP  
A FLORIDA LIMITED PARTNERSHIP

The undersigned General Partner desiring to form a partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is THE FLORENCE WOLFSON FAMILY LIMITED PARTNERSHIP.

2. The address of the office of the Partnership is 7580 Regency Lake Drive, #E-602, Boca Raton, FL 33433-6971.

3. The name and address of the agent for service of process of the Partnership is Florence F. Wolfson, 7580 Regency Lake Drive, #E-602, Boca Raton, FL 33433-6971.

4. The name and business address of the General Partner is: Florence Wolfson Family Corp. 7580 Regency Lake Drive, #E-602, Boca Raton, FL 33433-6971. *POI-106496*

5. The mailing address of the Partnership is 7580 Regency Lake Drive, #E-602, Boca Raton, FL 33433-6971.

6. The latest date upon which the Partnership shall dissolve is no later than December 31, 2048, unless the Partners agree to extend the term.

This Certificate is duly executed and is being filed in accordance with Section 620.108 of the Florida Revised Uniform Limited Partnership Act (1986).

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.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of The Florence Wolfson Family Limited Partnership this 24 day of January 2002.

THE FLORENCE WOLFSON FAMILY  
LIMITED PARTNERSHIP

By: FLORENCE WOLFSON FAMILY CORP.  
General Partner

By: *Florence F. Wolfson*  
Florence F. Wolfson, President

02 JAN 25 PM 2:14  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA :  
COUNTY OF PALM BEACH : SS:

I hereby certify that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared FLORENCE F. WOLFSON, as President of FLORENCE WOLFSON FAMILY CORP., to me known to be the person described in and who executed the foregoing Certificate of Limited Partnership, and she acknowledged before me that she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 24 day of January, 2002.

My commission expires:

Name: Joel Reinstein  
Notary Public, State of Florida



Joel Reinstein  
MY COMMISSION # DD045355 EXPIRES  
September 22, 2005  
BONDED THRU TROY FARM INSURANCE, INC.

WolfsonFLP.cer

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for The Florence Wolfson Family 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 the registered agent.

Florence F. Wolfson  
Florence F. Wolfson

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, constituting the general partner of THE FLORENCE WOLFSON FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership, certify as follows:

The amount contributed and anticipated to be contributed by the limited partner(s) at this time totals Five Million Three Thousand ~~00~~ Dollars (\$5,300,000).

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.

THE FLORENCE WOLFSON FAMILY  
LIMITED PARTNERSHIP

By: FLORENCE WOLFSON FAMILY CORP.  
General Partner

By: Florence F. Wolfson  
Florence F. Wolfson, President

STATE OF FLORIDA :

ss:

COUNTY OF PALM BEACH :

I hereby certify that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared FLORENCE F. WOLFSON, as President of FLORENCE WOLFSON FAMILY CORP., to me known to be the person described in and who executed the foregoing Affidavit of Capital Contributions, and she acknowledged before me that she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 24 day of January, 2002.

My commission expires:

Name: Joel Reinstein  
Notary Public, State of Florida

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Joel Reinstein  
MY COMMISSION # DD045255 EXPIRES  
September 22, 2006  
BONDED THRU TROY FAIN INSURANCE, INC.