

Division of Corporations

A02000000238

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**Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State**

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

AL

FLORIDA LIMITED PARTNERSHIP

MIAMI GARDENS DRIVE, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$87.50

**RECEIVED
02 FEB 22 PM 12:46
DIVISION OF CORPORATION**

FEB-22-2002 09:16

THERREL BAISDEN PA

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CERTIFICATE OF LIMITED PARTNERSHIP
OF
MIAMI GARDENS DRIVE, LTD.

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:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 22

1. The name of the Partnership is **MIAMI GARDENS DRIVE, LTD.**
2. The address of the office of the Partnership is **1541 Sunset Drive, Suite 300, Coral Gables, Florida 33143.**
3. The name and address of the agent for service of process on the Partnership is **Gerald M. Higier, 1541 Sunset Drive Suite 300, Coral Gables, Florida 33143.**
4. The name and business address of the General Partner is as follows:

MIAMI GARDENS DRIVE, L.L.C.
c/o Gerald M. Higier
1541 Sunset Drive Suite 300
Coral Gables, Florida 33143
5. The mailing address of the Partnership is: **c/o Gerald M. Higier, 1541 Sunset Drive Suite 300, Coral Gables, Florida 33143.**
6. The latest date upon which the Partnership shall dissolve is **February 20, 2099.**
7. The effective date of this Certificate of Limited Partnership shall be upon filing with the Department of State.

The execution of this Certificate by the undersigned General

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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 MIAMI GARDENS DRIVE, LTD, this 21 day of Feb, 2002.

GENERAL PARTNER

MIAMI GARDENS DRIVE, L.L.C.

By:


GERALD M. HIGIER, MANAGER

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TALLAHASSEE, FLORIDA

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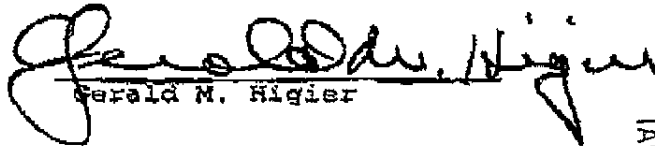
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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for MIAMI GARDENS DRIVE, LTD., 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


Gerald M. Higier

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TALLAHASSEE, FLORIDA

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STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared GERALD M. HIGIER, as Manager of MIAMI GARDENS DRIVE, L.L.C., a Florida limited liability company, which company is the General Partner of MIAMI GARDENS DRIVE, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who upon being fully sworn, certifies as follows:

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

HIGIER GROUP, LTD.	\$ 990.00
Total	\$ 990.00

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TALLAHASSEE, FLORIDA
02 FEB 2002

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

HIGIER GROUP, LTD.	\$ 0.00
Total	\$ -0-

FURTHER AFFIANT SAYS 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:

MIAMI GARDENS DRIVE, L.L.C., a
Florida limited liability
company

By:


GERALD M. HIGIER, ManagerDated: Feb. 21, 2002.

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The foregoing instrument was acknowledged before me this 21
day of Feb., 2002, by GERALD M. HIGIER, as Manager of MIAMI
GARDENS DRIVE, L.L.C., a Florida limited liability company, the
General Partner of the Partnership, who is personally known to me
or has produced as identification.

Ellen Rose
Notary Public, State of Florida
at Large

My Commission Expires:

Print/Type or Stamp Notary Name
Commission No. (if any) _____

M:\FORMS\flpa\Affidavit of Cap Cont.wpd

NOTARY PUBLIC - STATE OF FLORIDA
ELLEN ROSE
COMMISSION # C0785787
EXPIRES 02/22/2002
BONDED THRU APA 1-888-NOTARY1

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 FEB 22