BILZIN, SUMBERG, ET. AL*********

P. 001 Page 1 of 1

Division of

orations.

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000201801 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Comporations

Fax Number

: (850)205-0383

From:

: BILZIN, SUMBERG DUNN BAENA PRICE & AXELROD LLP. Account Name

Account Number : 075350000132

: (305)374-7500 Phone

: (305)350-2446 Fax-Number

STATEMENT OF CORPORATION

LIMITED PARTNERSHIP AMENDMENT

ORION CENTER ASSOCIATES, LTD.

Certificate of Status	11
Certified Copy	1
Page Count	01
Estimated Charge	\$113.75
Estilitated Charge	



Spoketick alludivent

Comparate Filipa:

FUNDE ACCORDINATE

FAX AUDIT NO: HO2-201801

STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

The name of the limited partnership as identified ORION CENTER ASSOCIATES, LTD.	in the records of the Florida Department of State:
Therefore Description of the CR	ION CENTER ASSOCIATES, LILP
After qualification, name should read: On Insert limited partnership's Florida document numb	er: A02000001271
or Attach certificate of limited partnership, affidavit of	capital contributions and applicable limited
 Suffix adopted for the above named partnership: 	ORION CENTER ASSOCIATES, LLLB
Z. Smith adopted for the above	(HIP, LLLP.)
3. The street address of its chief executive office:	2665 South Bayshore Drive, Perturbuse 25
(if different from current recorded address):	Miami, Florida 33133
(if different from current recorded address).	7
- Advers of principal office in Florida	2665 South Bayshore Drive, Penthouse 2A
	Mlami, Florida 33133
(if different from above)	
5. The limited partnership hereby elects to be a lin	nited liability limited partnership.
6. The effective date of this filing shall be: X as of the date this document	nt is filed with the Florida Secretary of State
or a date later than the time o	
7. The name and Florida street address of the par Ezra Katz	rtnership's agent for service of process:
2665 South Bayshore Drive, Penthouse	2A
	, Florida33133
Miami	
The execution of this statement as a partner consthat the facts stated herein are true.	titutes an affirmation under the penalties of perjury
Signed this 20th day of September	, 2002
Signature of TWO Partners:	
	W
- Indiana in the control of the cont	Ezra Katz, general partner
Typed or printed names of partners signing above	William T. Duncan, limited partner
ranified Co	g Fee: \$25.00 ppy (optional): \$52.50 FAX AUDIT NO: H02-201801 Status (optional): \$8.75