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Florida Department of State

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From:

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Phone (305) 374-5600 Fax Number : (305)374-5095

FLORIDA LIMITED PARTNERSHIP

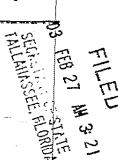
GOLFSTREAM, LTD.

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Estimated Charge	\$1,837.50

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FAX AUDIT No. H03000065326

CERTIFICATE OF LIMITED PARTNERSHIP OF GOLFSTREAM, LTD.

The undersigned, being the General Partner of Golfstream, Ltd., a Florida limited partnership, does hereby execute this Certificate, and hereby affirms, under penalties of perjury, that the facts stated hereinbelow are true:

1. The name of the limited partnership is:

Golfstream, Ltd.

The address of the record keeping office of the limited partnership is:

450 East Las Olas Boulevard Suite 1500 Fort Lauderdale, FL 33301

3. The name and address of the agent for service of process on the limited partnership

American Information Services, Inc. One Southeast Third Avenue, Suite 2800 Miami, FL 33131

4. The name and business address of the General Partner is:

450 East Las Olas Boulevard Suite 1500 Fort Lauderdale, FL 33301 L03000007294

5. The mailing address for the limited partnership is:

Golfstream, Ltd. 450 East Las Olas Boulevard Suite 1500 Fort Lauderdale, FL 33301

6. The latest date upon which the limited partnership is to dissolve is:

December 31, 2053

CVB, LLC, as General Partner

By: Cris V. Branden,

Sole Member and Manager

FAX AUDIT No. H03000065326

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting the General Partner of Golfstream, Ltd., a Florida limited partnership, certifies as follows:

The amount of capital contributions to date of the limited partners is \$0.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$10,000,000.

Further affiant sayeth naught.

Under penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Dated this 27 day of February, 2003.

CVB, LLC, as General Partner

as General Pariner

Cris V. Branden,

Sole Member and Manager