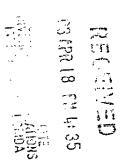
A0300000630

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500015635305









ACCOUNT NO. : 072100000032 REFERENCE: 058542 11758A COST LIMIT : \$ 140.00 ORDER DATE: April 18, 2003 ORDER TIME : 3:30 PM ORDER NO. : 058542-005 CUSTOMER NO: 11758A CUSTOMER: Jeffrey S. Wachs, Esq Doumar Allsworth Cross Laystrom Perloff Voigt Wachs M 1177 Southeast Third Avenue Fort Lauderdale, FL 33316 DOMESTIC FILING STANLEY J. LITVAK FAMILY NAME: LIMITED PARTNERSHIP EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Sara Lea - EXT. 1114 EXAMINER'S INITIALS:

CERTIFICATE OF LIMITED PARTNERSHIP

<u>OF</u>

STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP

THE UNDERSIGNED, constituting the General Partner of The STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP, a Florida Limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

- 1. Name of the Partnership: THE STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP
- 2. The address of the office of the Partnership is:

2505 E. Las Olas Blvd Ft. Lauderdale, FL 33301

3. <u>Name and addresses of the agent for the service</u> of process on the Partnership is:

JEFFREY S. WACHS, ESQ. 1177 S.E. 3rd Avenue Fort Lauderdale, FL 33316

4. Name and business address of the General Partner are:

STANLEY J. LITVAK 2505 E. Las Olas Blvd. Ft. Lauderdale, FL 33301

5. Mailing address of the Partnership is:

THE STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP c/o STANLEY J. LITVAK 2505 E. Las Olas Blvd. Ft. Lauderdale, FL 33301

6. Latest date upon which the Partnership will dissolve.

Will be in accordance with Section 620.157 of the Florida Statute, however, no laterathan December 31, 2003.

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

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership of STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP, this // day // day // 2003.

GENERAL PARTNER:

ey þ. lítvæ

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for STANLEY. ITVAK
FAMILY LIMITED PARTNERSHIP, a Florida limited partnership
("Partnership"), in the foregoing Certificate of Limited
Partnership, I, on behalf of the Partnership agree to comply with
any and all statutes relative to the complete and proper
performance of the duties of a registered agent.

REGISTERED AGENT:

3

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, personally appeared STANLEY J. LITVAR General Partner of STANLEY J. LITVAK FAMILY LIMITED PARTNERSHIP, herein referred to as the "Partnership", who, upon being duly sword certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$5,000.00

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

NONE

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

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.

DATED this // day of April , 2003.

TANLEY U. LTIVAK, General Partner

STATE OF FLORIDA)	
	SS:	
COUNTY OF BROWARD)	
		_

Notary Public, State of Florida
Print Name: LISQ D. BCICNSON
Commission Number: DD 133915
My Commission Expires: 810/06



O3 APR 18 AM 8:12