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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735

Fax Number : (954)641-4192

2544-524-507W03-1208

FLORIDA LIMITED PARTNERSHIP

BROOKSIDE APARTMENTS LAP

Certificate of Status	0
Certifled Copy	0
Page Count	03
Estimated Charge	\$87.50

200

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CERTIFICATE OF LIMITED PARTNERSHIP

 Name of Limited Partnership (must contain a suffix such as "Limited", "Ltd." or "Limited Partnership"):

BROOKSIDE TAMPA APARTMENTS a Florida limited partnership LTD...

2. Business Address of Limited Partnership:

c/o Adorno & Yoss, P.A. 700 South Federal Highway, Suite 200 Boca Raton, Florida 33432

Name of Registered Agent:

Steven Garellek

4. Address of Registered Agent:

700 South Federal Highway Suite 200 Boca Raton, Florida 33432

5. Signature of Resident Agent Accepting Designation:

Seven Garellek

6. Mailing Address of the Limited Partnership:

c/o Adomo & Yoss, P.A. 700 South Federal Highway Suite 200 Boca Raton, Florida 33432

7. The letest date upon which the Limited Parinership is to be dissolved:

December 31, 2053

SCHELARY LT STATE

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8. Name and Address of General Parmer:

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.

Signed this 24 of April, 2003.

GENERAL PARTNERS

Brookside GP Inc., a Florida corporation

By: Ron Eisenberg, President

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AFFIDAVIT

COUNTY OF PALM BEACH STATE OF FLORIDA

Before me the undersigned authority, personally appeared Ron Eisenberg, who being first duly aworn, on oath deposes and states:

The undersigned being President of Brookside GP Inc., a Florida corporation, the general partner of BROOKSIDE TAMPA ... a Florida limited partnership, certifies:

APARTMENTS LTD.

- 1. The amount of capital contributions to date of the limited partners is
- 3. Affiant further states that he is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements made in an instrument of this nature. Affiant further certifies that he has read, or has heard read to him, the full facts of this Affidavit and understands its contents.

Dated this 21 day of April, 2003.

By: Ron Eisenberg, President of Brookside GP Inc.,

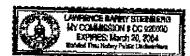
General Partner of Brookside 'Tampa Apartments LTD-

SWORN TO AND SUBSCRIBED AND ACKNOWLEDGED before me this 32 day of April, 2003, by Ron Eisenberg, as President for and on behalf of Brookside GP Inc., a Florida corporation, general partner of Brookside Apartments L.P., who is personally known to me or produced _______ as identification.

Notary Public State of Plotid

(seal)

My Commission Expires:



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