

A03 0000000996

Florida Department of State
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.

(((H03000230575 0)))

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

To:

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

From:

Account Name : BROAD AND CASSEL (BOCA RATON)
Account Number : 076376001555
Phone : (561)483-7000
Fax Number : (561)218-8960

FLORIDA LIMITED PARTNERSHIP

PSL Town Center MW Group, Ltd.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$148.75

A03-996
al

FILED

03 JUL 10 PM 3:13

RECEIVED

03 JUL 10 PM 2:53

DIVISION OF CORPORATIONS

Fax Audit Number: H03000230575 0

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

PSL TOWN CENTER MW GROUP, LTD.,
a Florida limited partnership

The undersigned general partner, desiring to form a limited partnership pursuant to Florida Revised Uniform Limited Partnership Act as set forth in Part I, Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the limited partnership is PSL TOWN CENTER MW GROUP, LTD.
(the "Partnership").

2. The address of the office of the Partnership is 815 Colorado Avenue, Suite 101, Port St. Lucie, Florida 34994.

3. The name and address of the agent for service of process on the Partnership is PSL Town Center GP, LLC, 815 Colorado Avenue, Suite 101, Port St. Lucie, Florida 34994.

4. The name and business address of each general partner is as follows:

PSL Town Center GP, LLC 815 Colorado Avenue
Suite 101
Port St. Lucie, Florida 34994.

5. The mailing address of the Partnership 815 Colorado Avenue, Suite 101, Port St. Lucie, Florida 34994.

6. The latest date upon which the Partnership will dissolve is December 31, 2103.

The execution of this certificate on behalf of the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

This Certificate of Limited Partnership has been executed on behalf of the sole General Partner of PSL Town Center MW Group, LTD. this 8th day of July, 2003.

GENERAL PARTNER:

PSL TOWN CENTER GP, LLC
a Florida limited liability company

By: 

Max Shapiro, Manager

Fax Audit Number: H03000230575 0

Fax Audit Number: H03000230575 0

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for PSL Town Center MW Group, Ltd., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned corporation, on behalf of the Partnership, hereby agrees 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:

PSL TOWN CENTER GP, LLC
a Florida limited liability company

By: 
Max Shapiro, Manager

FILED
JUL 10 PM 3:10
TALAHASSEE, FLORIDA

Fax Audit Number: H03000230575 0

* Fax Audit Number: H03000230575 0

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, on behalf of the sole general partner of PSL TOWN CENTER MW GROUP, LTD., a Florida limited partnership, certifies as follows:

FIRST: The amount of capital contributions to date of the limited partners is \$100.

SECOND: The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$7,500.

Executed this 8th day of July, 2003.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury the undersigned declares that it has read the foregoing and that the facts alleged are true, to the best of its knowledge and belief.

GENERAL PARTNER:

PSL TOWN CENTER GP, LLC,
a Florida limited liability company

By: 

Max Shapiro, Manager

FILED
JUL 10 PM 3:10
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA

116876

Fax Audit Number: H03000230575 0