

A03000001504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

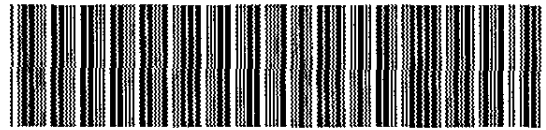
(Business Entity Name)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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03 OCT 23 PM 3:58
TALLAHASSEE, FLORIDA

A handwritten signature in black ink, appearing to be 'M. J. ...'.



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 291708 4133D

AUTHORIZATION :

COST LIMIT : \$ 14875 *Patricia Piguet*

ORDER DATE : October 23, 2003

ORDER TIME : 10:22 AM

ORDER NO. : 291708-015

CUSTOMER NO: 4133D

CUSTOMER: Louise J. Allen
Stearns Weaver Miller
Weissler Alhadeff & Sitterson,
Suite 1900
200 East Broward Boulevard
Ft. Lauderdale, FL 33301

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: RELIANCE-CYPRESS GROVE
ASSOCIATES, LTD.

*****FILE SECOND*****

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret - EXT. 1149

EXAMINER'S INITIALS:

CERTIFICATE OF LIMITED PARTNERSHIP
OF
RELIANCE-CYPRESS GROVE ASSOCIATES, LTD.

Pursuant to Section 620.108 of the Florida Revised Uniform Limited Partnership Act, the undersigned, being the sole General Partner of Reliance Cypress Grove, LLC, a Florida limited partnership (the "Partnership"), does hereby execute and submit for filing with the Department of State, State of Florida, this Certificate of Limited Partnership, to read as follows:

1. The name of the Limited Partnership is:
Reliance-Cypress Grove Associates, Ltd.
2. The office and principal place of business for the Partnership currently is:
516 Northeast 13th Street
Fort Lauderdale, Florida 33304
3. The name and address of the agent for service of process on the Partnership is:
Robert O. Jackson
Reliance Housing Foundation, Inc.
516 Northeast 13th Street
Fort Lauderdale, Florida 33304
4. The name and address of the sole General Partner of the Partnership is:
Reliance-Cypress Grove, LLC
516 Northeast 13th Street
Fort Lauderdale, Florida 33304
5. The mailing address of the Partnership is:
c/o Reliance Housing Foundation, Inc.
516 Northeast 13th Street
Fort Lauderdale, Florida 33304
6. The latest date upon which the Partnership shall dissolve is December 31,

2053.

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RELIANCE-CYPRESS GROVE ASSOCIATES, LTD.
FORT LAUDERDALE, FLORIDA

LC 300040754

IN WITNESS WHEREOF, the undersigned has signed this Certificate of Limited Partnership as sole General Partner pursuant to the provisions of Section 620.114 of the Florida Revised Uniform Limited Partnership Act.

DATED: October 22, 2003

RELIANCE-CYPRESS GROVE, LLC,
a Florida limited liability company

By: 
ROBERT O. JACKSON, Manager

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

Robert O. Jackson hereby accepts his/her/its appointment as registered agent for Reliance-Cypress Grove Associates, Ltd., a Florida limited partnership and states that he is familiar with and accepts the obligations provided for in Florida Statutes Section 607.0501.

DATED: October 22, 2003


ROBERT O. JACKSON, Registered Agent

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA)
) SS:
COUNTY OF Broward)

BEFORE ME, the undersigned authority, personally appeared ROBERT O. JACKSON, as Manager of RELIANCE-CYPRESS GROVE, LLC, a Florida limited liability company, as sole General Partner of RELIANCE-CYPRESS GROVE ASSOCIATES, LTD., a Florida limited partnership (the "Partnership"), who states as follows:

1. The aggregate capital contributions made by the Limited Partners of the Partnership to the Partnership is \$1,000.00.
2. It is anticipated that the Limited Partners will not make additional contributions to the capital of the Partnership.

The foregoing instrument was acknowledged before me this 23rd day of October, 2003, by ROBERT O. JACKSON, as Manager of RELIANCE-CYPRESS GROVE, LLC, a Florida limited liability company, as sole General Partner of RELIANCE-CYPRESS GROVE ASSOCIATES, LTD., a Florida limited partnership (the "Partnership"), who is personally known to me or who has produced a driver's license as identification and



Print or Stamp Name: STEPHEN JANTON
Notary Public, State of Florida at Large
Commission No.: CC 9 32276
My Commission Expires: 4/30/04

A handwritten signature in black ink, appearing to read "Stephen R. Janton", written over the notary seal and extending to the right.