# A0400000196

		•		
(Re	equestor's Name)			
(Ad	ldress)	<del></del>		
(Ad	ldress)			
() 10	idicasy			
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	TIAW [	MAIL		
	siness Entity Name	<u>e)                                      </u>		
(50	iomess Emily Marin	<i>-,</i>		
(Do	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
		j		
		·		
<del></del>	· · · · · · · · · · · · · · · · · · ·			

Office Use Only



100027467401

UZYCZ/C4 - U1UC1 - OCC - \*\*SEC.OC

DX.

B-5 DI 5: 55

B-



ACCOUNT NO. : 072100000032

REFERENCE: 426227 7146324

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: February 5, 2004

ORDER TIME : 12:57 PM

ORDER NO. : 426227-005

CUSTOMER NO: 7146324

CUSTOMER: Gregory Martini, Esq

Sacher, Martini & Sacher, Pa

Suite 1101

2655 Lejeune Road

Coral Gables, FL 33134

#### DOMESTIC FILING

NAME:

3615 THOMAS LTD.

#### EFFECTIVE DATE:

	ARTICLES	OF.	INC	CORPORAT.	LON
XX	CERTIFICA	$\Delta TE$	OF	LIMITED	PARTNERSHIP
	ARTICLES	OF	ORGANIZATION		ON

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS:

### CERTIFICATE OF LIMITED PARTNERSHIP

		· Q.
		1. S. C.
1.	3615 THOMAS LTD.	
	(Name of Limited Partnership; must contain a suffix	such as "Limited", "Ltd", or "Limited Pattnership"),
2.	107 Sarto Avenue, Coral Gables, FL 33134	The second se
	(Business address of Li	mited Partnership)
	•	
3.	Gregory T. Martini	
	(Name of Registered Agent	for Service of Process)
	(- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
4.	2655 Le Jeune Road, Suite 1101, Oprat Gial	oles, FL 33134
••		r Registered Agent)
5.	/ /h ////	
٠.	(Registered seep must sign here to accept designati	on as Registered Agent for Service of Process)
	(Acgustical)	on an inegration of records,
6.	P.O Box 331056, Coconut Grove, FL 3323	<b>3</b>
0.	(Mailing Address of the I	imited Partnershin)
	(Waiting Address of the L	sinited i atthership)
7.	The latest date upon which the Limited Partnershi	n is to be dissolved is December 31, 2053
1.	The fatest date upon which the Emilied Fathletship	p is to be dissolved is December 31, 2033
0	NI (A C I I (A)	G 11
8.	Name(s) of general partner(s):	Street address:
	251110	107.0
AC	REI, LLC.	107 Sarto Ave.
		Coral Gables, FL 33134
۴	NO NORTH LITTLE TO	
l	_03000010002	
		e read the foregoing and know the contents thereof
and	that the facts stated herein are true and correct.	
	, (	
Sign	ed this day of February, 2004.	
Sign	ature of all general partners:	
	1 11 1	
ACI	REI, LLC., a Florida limited liability company	
	IXXI	
Con	stunting J. Scurtis, Manager	
	Z / X/	
	У	

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FLORIDA LIMITED PARTNERSHIP

The undersigned constituting all of the general partners of3615 THOMAS LTD.
a Florida Limited Partnership, certify:
The amount of capital contributions to date of the limited partners is \$50,000.00.  The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$132,500.00.
Signed this 4 day of February, 2004.
FURTHER AFFIANT SAYETH NOT.
Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.
ACREI, LLC., a Fiorida limited liability company  Constantine L. Scritis Manager

W:\2141-94\wp\3615 Thomas Ltd.wpd