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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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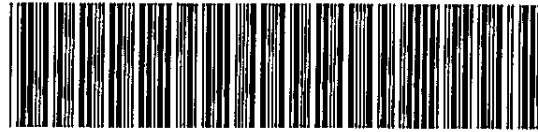
(Business Entity Name)

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07/09/04--01018--002 **35.00

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04 JUL -9 PM 2:39
CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS

207/14/04

A. JEFFREY BARASH, P.A.

ATTORNEY AT LAW
1140 KANE CONCOURSE - FOURTH FLOOR
BAY HARBOR ISLANDS, FLORIDA 33154-2055

A. JEFFREY BARASH, Esq.

A MEMBER OF THE BARS OF:
FLORIDA, NEW YORK & CALIFORNIA
FLORIDA BOARD CERTIFIED TAX ATTORNEY

TEL: (305) 868-7800
FAX: (305) 866-4276

July 7, 2004

Florida Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re: Golden Gate Family Ltd.

Gentlemen:

Please find enclosed a Certificate of Limited Partnership and Affidavit to be filed on behalf of the above Limited Partnership together with checks to your order in the sum of \$1750 representing the initial capitalization of the above Limited Partnership and \$35.00 for the Designation of Registered Agent.

Kindly forward your letter indicating the opening of said Limited Partnership and the assignment of a number to it.

Thanking you for your cooperation in this matter.

Very truly yours,

A. JEFFREY BARASH
For the Firm

AJB/mlh
encls.

cc: Mr. & Mrs. Michael Brier

04 JUL -9 PM 2:39
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CERTIFICATE OF LIMITED PARTNERSHIP
OF
GOLDEN GATE FAMILY LTD.

19th This Certificate of Limited Partnership ("Partnership") dated this ___ day of June, 2004, has been duly executed and is being filed by the undersigned in accordance with the provisions of Florida Revised Uniform Limited Partnership Act (1986)

1. Name. The name of the limited partnership is:

GOLDEN GATE FAMILY LTD.

2. Registered Office. The address of the registered office of the partnership in the State of Florida is:

GOLDEN GATE FAMILY CORPORATION
3968 194TH Trail
Sunny Isles Beach, FL 33160

3. Registered Agent. The name and address of the registered agent for service of process on the Partnership in the State of Florida is:

MICHAEL BRIER
c/o GOLDEN GATE FAMILY CORPORATION
3968 194TH Trail
Sunny Isles Beach, FL 33160

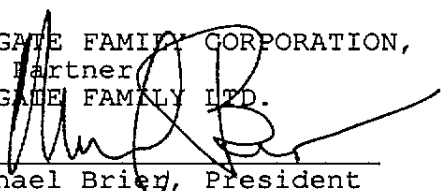
4. General Partner. The name and mailing address of the general partner of the Partnership is as follows:

GOLDEN GATE FAMILY CORPORATION
3968 194TH Trail
Sunny Isles Beach, FL 33160

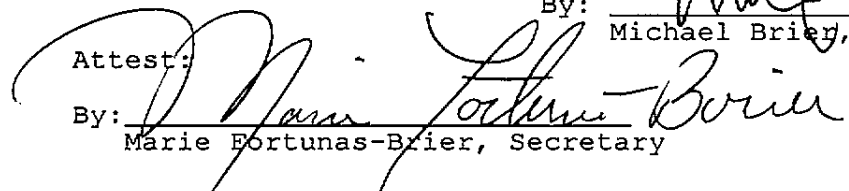
5. Term of Partnership. The Partnership will end on December 31 of the year following the expiration of 30 years from the date this Certificate of Limited Partnership is filed with the Florida Secretary of State.

IN WITNESS WHEREOF, the undersigned, being the general partner of the Partnership, has executed this Certificate of Limited Partnership as of the day and year aforesaid.

GOLDEN GATE FAMILY CORPORATION,
General Partner
GOLDEN GATE FAMILY LTD.

By: 
Michael Brier, President

Attest:

By: 
Marie Fortunas-Brier, Secretary

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL -9 PM 2:39

PO4-99504

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting the sole general partner of GOLDEN GATE FAMILY LTD., a Florida Limited Partnership, hereby certifies:

1. The amount of capital contributions to date of limited partners is \$-0-.
2. The total amount contributed and anticipated to be contributed by the limited partners at this time is \$2,000,000.

Signed this 18th day of June, 2004.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury the undersigned declares that he has read the foregoing and knows the contents thereof and that the facts stated herein are true and correct.

GOLDEN GATE FAMILY CORPORATION,
GENERAL PARTNER, GOLDEN GATE FAMILY LTD.

BY: _____

MICHAEL BRIER, PRESIDENT

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DIVISION OF CORPORATIONS
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