

A 04 00 00001654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

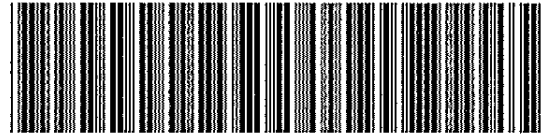
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

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04 OCT 20 PM 5:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 934763 6475A
AUTHORIZATION :
COST LIMIT : \$ 1837.50

Patricia Pigute

ORDER DATE : October 20, 2004
ORDER TIME : 10:47 AM
ORDER NO. : 934763-005
CUSTOMER NO: 6475A
CUSTOMER: Ms. Cindy Clark
Atkinson Diner Stone Mankuta
& Ploucha, P.a.
1946 Tyler Street
Hollywood, FL 33020

DOMESTIC FILING

NAME: THE ELSIE M. SPECHLER FAMILY
LIMITED PARTNERSHIP

EFFECTIVE DATE:

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Justin Cheshire - EXT. 2909

EXAMINER'S INITIALS: _____

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04 OCT 20 11 5:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP

OF

THE ELSIE M. SPECHLER FAMILY LIMITED PARTNERSHIP

The undersigned general partner, desiring to form a limited partnership pursuant to the laws of the State of Florida, certifies as follows:

1. **Name of Limited Partnership.** The name of the limited partnership is THE ELSIE M. SPECHLER FAMILY LIMITED PARTNERSHIP.
2. **Office for Maintenance of Business Records.** The address of the office at which the records of the limited partnership will be kept is 917 N. Northlake Drive, Hollywood, Florida 33019.
3. **Agent for Service of Process.** The name and address of the limited partnership's agent for service of process in Florida is Wilson C. Atkinson, III, Esq., c/o Atkinson, Diner, Stone, Mankuta & Ploucha, P.A., 1946 Tyler Street, Hollywood, Florida 33020.
4. **General Partners.** The name and business address of the General Partner in the limited partnership is as follows:

<u>Name</u>	<u>Address</u>
Spechler Investment Management, Inc.	917 N. Northlake Drive Hollywood, Florida 33019

5. **Mailing Address of Partnership.** The mailing address of the limited partnership is 917 N. Northlake Drive, Hollywood, Florida 33019.
6. **Latest Date of Dissolution.** The latest date on which the limited partnership is to dissolve is December 31, 2010.

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 14 day of October, 2004.

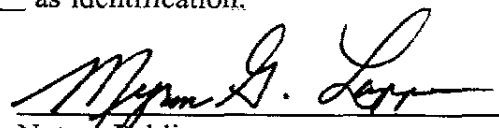
GENERAL PARTNER:

SPECHLER INVESTMENT MANAGEMENT, INC.,
a Florida corporation

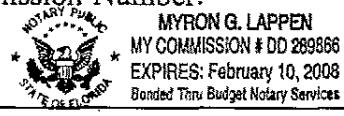
By: Brent Spechler
BRENT SPECHLER, President

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 14th day of Oct., 2004, by BRENT SPECHLER, as President of SPECHLER INVESTMENT MANAGEMENT, INC., the General Partner of THE ELSIE M. SPECHLER FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, who is personally known to me or who has produced _____ as identification.

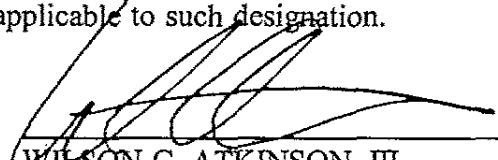


Notary Public
State of Florida
My Commission Expires:
My Commission Number:



(Printed, typed or stamped commissioned name of Notary Public)

The undersigned hereby accepts the foregoing designation as agent for service of process and agrees to comply with the provisions of law applicable to such designation.



WILSON C. ATKINSON, III

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting all of the General Partners of THE ELSIE M. SPECHLER FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, certifies that the capital contributions of all the Limited Partners in the partnership are as follows:

1. The amount of capital contributions to date of the Limited Partners is \$0.00.
2. The total amount contributed and anticipated to be contributed by the Limited Partners at this time totals \$1,200,000.00.

Signed this 14 day of October, 2004.

FURTHER AFFIANT SAYETH NOT.

Under the 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.

GENERAL PARTNER:


SPECHLER INVESTMENT MANAGEMENT, INC.,
a Florida Corporation

By: 
BRENT SPECHLER, President

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 14th day of Oct., 2004, by BRENT SPECHLER, as President of SPECHLER INVESTMENT MANAGEMENT, INC., a Florida corporation and the General Partner of THE ELSIE M. SPECHLER FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, who is personally known to me or who has produced _____ as identification.



Notary Public
State of Florida
My Commission Expires:
My Commission Number:
 MYRON G. LAPPEN
MY COMMISSION # DD 289866
EXPIRES: February 10, 2008
Bonded Thru Budget Notary Services

(Printed, typed or stamped commissioned name of Notary Public)