

A04000001685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

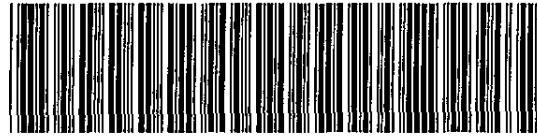
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TALLAHASSEE, FLORIDA
STATE OF FLORIDA
DIVISION OF REVENUE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 942446 7236924

AUTHORIZATION :

COST LIMIT : \$ 1837.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : October 26, 2004

ORDER TIME : 9:47 AM

ORDER NO. : 942446-010

CUSTOMER NO: 7236924

CUSTOMER: Gary A. Korn, Esq
Leopold, Korn & Leopold, P.a.

Suite 501
20801 Biscayne Blvd.
Aventura, FL 33180

DOMESTIC FILING

NAME: MORTGAGE INVESTMENT GROUP 47,
LTD.

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

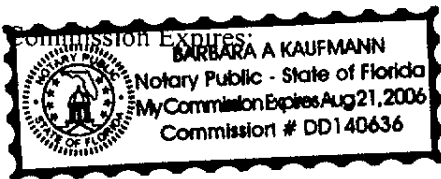
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TALLAHASSEE, FLORIDA
the Florida Revised
Statutes, do hereby
to be conducted

I:\work\BERDMAN\Las Vegas\CertLtdPart.wpd

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) SS:

The foregoing instrument was acknowledged before me this 22nd day of October, 2004, by HARVEY BIRDMAN, as Manager of SUNVEST RESORT COMMUNITIES L.C., a Florida limited liability company, the Manager of VEGAS ACQUISITIONS L.L.C., a Florida limited liability company, who is personally known to me.

My



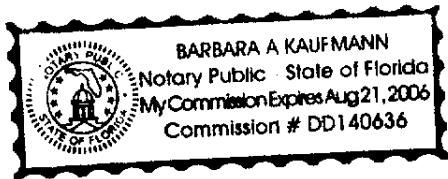
Barbara A. Kaufmann
Notary Public, State of Florida

Print Name: Barbara A. Kaufmann

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) SS:

The foregoing instrument was acknowledged before me this 22nd day of October, 2004, by GARY A. KORN, Trustee, who is personally known to me.

My Commission Expires:



Barbara A. Kaufmann
Notary Public, State of Florida

Print Name: Barbara A. Kaufmann

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

I hereby accept the designation of Registered Agent as set forth in this Certificate of Limited Partnership for MORTGAGE INVESTMENT GROUP 47, LTD., a Florida Limited Partnership.

[Signature]
LOUIS BIRDMAN, Registered Agent

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

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