Division of Corporations 6:06PM P. | Page 1 of 1 No.5722

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000066162 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)205-0383 Fax Number

From:

: KRAMER, GREEN, ZUCKERMAN & KAHN, P.A. Account Name

Account Number : 073707002173 : (954)966-2112 Phone : (954)981-1605

Fax Number

FLORIDA LIMITED PARTNERSHIP

AXIOM MANAGEMENT SERVICES, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$140.00

https://ofile.makin.aun/maketa/afile.com

(((H050000661623)))

CERTIFICATE OF LIMITED PARTNERSHIP

Pursuant to Section 620.108 of the Florida Statutes, the following statement is made:

- 1. The name of the Limited Partnership is Axiom Management Services, Ltd.
- 2. The address of the office and the name and address of the agent for service of process required to be maintained by Section 620.105 of the Florida Statutes is:

Mitchell F. Green KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A. 4000 Hollywood Blvd., Suite 485 South Hollywood, Florida 33021

3. The name and business address of the General Partner is:

Dennis Nobbe 8303 Bird Road Miami, FL 33155

4. The mailing address and street address for the Limited Partnership is:

8303 Bird Road Miami, FL 33155

5. The latest date upon which the Limited Partnership is to dissolve is December 31, 2038.

Dennis Nobbe, General Partner

(((H05000066162 3)))

(((H050000661623)))

STATE OF FLORIDA }
COUNTY OF BROWARD }

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Dennis Nobbe, as the General Partner of Axiom Management Services, Ltd., to me known to be the person described in and who executed the foregoing Certificate of Limited Partnership and he acknowledged before me that he executed the same. He is personally known to me or produced ______ as identification and he took an oath.

My Commission DD384711
Expires 01/09/2009
NOTARY PUBLIC

Barbara Graciela Gonzalez

(seal)

K:\MFC\DYNAMIC MEDICAL SERVICES\AXIOM MEDICAL SERVICES\Centificate of Limited Partnership.frm



(seal)

(((H05000066162 3)))

LIMITED PARTNERSHIP AFFIDAVIT

STATE OF FLORIDA COUNTY OF BROWARD	}			
Pursuant to Section 620.108 of the undersigned is the amount of the original forms.	ne General Parti ginal capital cor	ner of Axiom Manag	gement Services, Ltd nited Partners is \$990	l .
The additional amount anticipat FURTHER AFFIANT SAY			2	ennis
STATE OF FLORIDA COUNTY OF BROWARD	}		TALLAH	OS MAR
I HEREBY CERTIFY that or aforesaid and in the County afore Nobbe, General Partner of Axion described in and who execute acknowledged before me that he did produce	esaid to take ack in Management : ed the foregoi e executed the sa	nowledgments, pers Services, Ltd., to me ng Limited Partne	sonally appeared De known to be the pe rship Affidavic and illy known to me or	gnis rgon The
WITNESS my hand and off of March,2005.		County and State last Notary Public State Barbera Gradela My Commission E Expires 01/09/200	e of Florida Gonzalez 30384711	day

K:\MFG\DYNAMIC MEDICAL SERVICES\AXIOM MEDICAL SERVICES\Limited Partnership Affidavit.wpd

(((H05000066162 3)))

ACKNOWLEDGMENT OF APPOINTMENT OF REGISTERED AGENT

AXIOM MANAGEMENT SERVICES, LTD.

The undersigned, having been named the Registered Agent for the above Limited Partnership at 4000 Hollywood Boulevard, Suite 485 South, Hollywood, Florida 33021, the undersigned hereby accepts the same and agrees to act in this capacity and agrees to comply with the provisions of Florida law relative to keeping the registered office open.

Dated: March 15 , 2005.

REGISTERED AGENT:

Mitchell F. Green

KIMFGIDYNAMIC MEDICAL SERVICES\AXIOM MEDICAL SERVICES\AXiometed Appointment of Registered Agent work

(((H05000066162 3)))