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**CERTIFICATE OF LIMITED PARTNERSHIP**

**OF**

1. **THE LEON FAMILY LIMITED PARTNERSHIP**  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

2. 7481 SW 56 St., Miami Florida 33155  
(Business address of Limited Partnership)

3. Gustavo G. Leon  
(Name of Registered Agent for Services of Process)

4. 7481 SW 56 St., Miami Florida 33155  
(Florida Street address for Registered Agent)

5. *G. Leon*  
(Registered Agent must sign to accept designation as Registered Agent for Service of Process)

6. 7481 SW 56 St., Miami Florida 33155  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is October 1, 2052

8. Name of general partner (s):	Specific address:
<u>GUSTAVO G. LEON</u>	<u>7481 SW 56 St., Miami Florida 33155</u>
<u>MONICA RABASSA</u>	<u>7481 SW 56 St., Miami Florida 33155</u>

Signed this 15 day of November, 2003.

Signature of all general partners:

*G. Leon*  
GUSTAVO G. LEON  
General Partner

*M. Rabassa*  
MONICA RABASSA  
General Partner

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

**THE UNDERSIGNED** constituting all of the general partners of **THE LEON FAMILY LIMITED PARTNERSHIP**, a Florida Limited Partnership, certify:

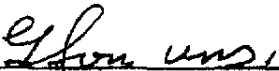
The capital contribution to date of the limited partners is \$100,000.00.

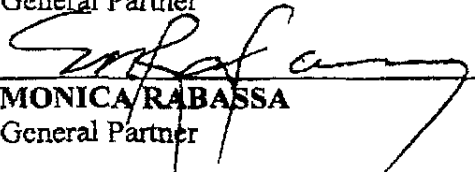
The total amount contributed and anticipated to be contributed by the limited partners at this time total \$100,000.00.

**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.

Dated, this 15 day of November, 2003.

  
\_\_\_\_\_  
**GUSTAVO G. LEON**  
General Partner

  
\_\_\_\_\_  
**MONICA RABASSA**  
General Partner

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