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CORPORATION NAME (S) AND DOCUMENT NUMB

Lucy Street S	Shops,	Ltd.
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ucy S	Street Shops, Ltd.	(FILE FIRS	T)		
	Filing Evidence  Plain/Confirmation	on Copy		Type of Docume Certificate of Sta	
	□ Certified Copy			Certificate of Go	od Standing
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	Non Profit		Resignation of RA O	fficer/Director	
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	Fictitious Name	<u> </u>	Limited Liability		
	Name Reservation		Reinstatement		
	Reinstatement		Trademark		

Other

## LUCY STREET SHOPS LTD. CERTIFICATE OF LIMITED PARTNERSHIP

SAMO AND SAMO Pursuant to § 620.108 of the Florida Statutes, the undersigned person, desiring to form Florida Limited Partnership, hereby swears to and affirms as follows:

- 1. The name of the Limited Partnership shall be LUCY STREET SHOPS, LTD.
- 2. The character of the business is the acquisition, development, ownership, renting, operation, and/or disposition by sale or exchange of real and/or personal property and/or any other lawful enterprise.
- 3. The location of the principal place of business is 901 Ponce De Leon Blvd. Suite 603, Coral Gables, Florida 33134. The name and address of the agent for service of process is William H. Albornoz, Esq., 901 Ponce De Leon Blvd., Suite 603, Coral Gables, Florida 33134.
  - 4. The name and business address of the General Partner shall be as follows:

Lucy Street Shops, LLC 901 Ponce De Leon Blvd., Suite 603 Coral Gables, FL 33134

LUS000021861

5. The mailing address for the Limited Partnership shall be as follows:

> 901 Ponce De Leon Blvd., Suite 603 Coral Gabels, FL 33134

6. The term of the Partnership shall commence upon the filing of this Certificate of Limited Partnership with the Secretary of State of the State of Florida, and it shall continue for fifty (50) years from such filing, unless otherwise terminated or extended in accordance with the provisions of the Partnership Agreement.

IN WITNESS WHEREOF, the party hereto has executed this Certificate of Limited Partnership on the 11 day of 140, 2005, effective upon filing same with the Florida Department of State.

LUCY STREET SHOPS, LLC,

General Partner

BY:

UIS HENAO, Manager

BY:

JUAN OSORNO, Manager

## ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for LUCY STREET SHOPS, LTD., a Florida limited partnership in the foregoing Certificate of Limited Partnership, William H. Albornoz, Esq., on behalf of the Partnership, hereby agrees to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT

WILLIAM H. ALBORNOZ, ESQ.

## **AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared Luis Henao and Juan Osomo, as Managers of the general partner of LUCY STREET SHOPS, LTD., a Florida limited partnership (hereinafter referred to as the "Partnership"), who upon being sworn, certified as follows:

The amount of initial capital contributions of the limited partners is \$100. The total amount contributed and anticipated to be contributed by the limited partners at this time totals 1,500,000.

This 17 day of Mr, 2005.

FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true, to the best of my knowledge and belief.

	LUCY STREET SHOPS, LLC,
	General Partner
BY:	LUIS HENAO, Manager
BY:	JUAN OSORNO, Manager
STATE OF FLORIDA ) ) SS:	
COUNTY OF MIAMI-DADE )	
LUIS HENAO, who did execute the foregoing A: the General Partner, who is personally known to	ed before me this \( \) day of \( \) day of \( \), 2005, by ffidavit of Capital Contributions as a Manager of me, or who has produced \( \) as edged before me that he executed the same freely
	Signature - NOTARY PUBLIC
WILLIAM H. ALBOTINUZ Notary Pholic - State of Florida My Compression Express Mar 12, 2000	Printed Name of NOTARY PUBLIC
e de la company	Commission Number

Page 2

STATE OF FLORIDA )	
) SS:	
COUNTY OF MIAMI-DADE )	
The foregoing instrument was acknowledged JUAN OSORNO, who did execute the foregoing Afthe General Partner, who is personally known to ridentification, and being first duly sworn, acknowled and voluntarily for the purposes therein expressed.	ne, or who has produced as a dged before me that he executed the same freely
	Signature - NOTARY PUBLIC
	Printed Name of NOTARY PUBLIC
Which are the second of	
Minimal Provides State of Providence of Prov	Commission Number