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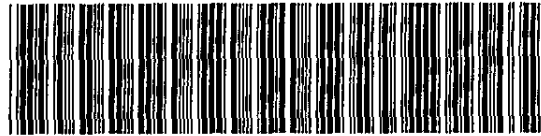
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 508231 11758A
AUTHORIZATION : *Patricia Pajot*
COST LIMIT : \$ 140.00

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TALLAHASSEE, FLORIDA

ORDER DATE : July 27, 2005

ORDER TIME : 11:43 AM

ORDER NO. : 508231-005

CUSTOMER NO: 11758A

CUSTOMER: Jeffrey S. Wachs, Esq
Doumar Allsworth Cross
Laystrom Perloff Voigt Wachs M
1177 Southeast Third Avenue

Fort Lauderdale, FL 33316

DOMESTIC FILING

NAME: THE SILLANTO FAMILY
INVESTMENTS LIMITED
PARTNERSHIP

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP
____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

CERTIFICATE OF LIMITED PARTNERSHIP

OF

THE SILLATO FAMILY INVESTMENTS LIMITED PARTNERSHIP

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TALLAHASSEE, FLORIDA

THE UNDERSIGNED, constituting the General Partner of THE SILLATO FAMILY INVESTMENTS LIMITED PARTNERSHIP, a Florida Limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. Name of the Partnership: THE SILLATO FAMILY INVESTMENTS LIMITED PARTNERSHIP

2. The address of the office of the Partnership is.

517 S. Riverside Drive
Pompano Beach, FL 33062

3. Name and addresses of the agent for the service of process on the Partnership is.

JEFFREY S. WACHS, ESQ.
1177 S.E. 3rd Avenue
Fort Lauderdale, FL 33316

4. Name and business address of the General Partner is.

Eugenio Sillato, a/k/a Tony
Sillato and Sharon L. Sillato
517 S. Riverside Drive
Pompano Beach, FL 33062

5. Mailing address of the Partnership is.

THE SILLATO FAMILY INVESTMENTS
LIMITED PARTNERSHIP
c/o Eugenio Sillato, a/k/a Tony
and Sharon L. Sillato,
General Partners
517 S. Riverside Drive
Pompano Beach, FL 33062

6. Latest date upon which the Partnership will dissolve.

Will be in accordance with Section 620.157
of the Florida Statute, however, no later than
December 31, 2055.

The execution of this Certificate by the undersigned General
Partners constitute an affirmation under penalties of perjury that
the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned have duly executed this
Certificate of Limited Partnership of THE SILLATO FAMILY
INVESTMENTS LIMITED PARTNERSHIP, this 15th day July,
2005.

GENERAL PARTNER(S):

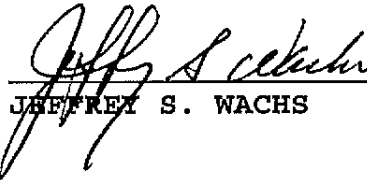

By: EUGENIO SILLATO, a/k/a
TONY SILLATO


By: SHARON L. SILLATO

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for **THE SILLATO FAMILY INVESTMENTS LIMITED PARTNERSHIP**, a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership agree to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:



JEFFREY S. WACHS

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared EUGENIO SILLATO, a/k/a TONY SILLATO and SHARON L. SILLATO, the General Partners of THE SILLATO FAMILY INVESTMENTS LIMITED PARTNERSHIP, a Florida limited partnership, herein referred to as the "Partnership", who, upon being duly sworn, certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$5,000.00

2. The amount of capital contributions anticipated to be contributed by additional Limited Partners is as follows:

NONE

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

FURTHER AFFIANT SAYETH NOT.

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

DATED this 15th day of July, 2005.



EUGENIO SILLATO, a/k/a
TONY SILLATO



SHARON L. SILLATO

STATE OF FLORIDA)
 SS:
COUNTY OF BROWARD)

SWORN TO AND SUBSCRIBED before me, the undersigned authority,
by **EUGENIO SILLATO, a/k/a TONY SILLATO**, who appeared personally
before me and took an oath, who is personally known to me or who
produced _____ as
identification, on this 15th day of July, 2005.



Lisa D. Belenson
Commission # DD133915
Expires Aug. 10, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

Lisa D. Belenson
Notary Public, State of Florida
Print Name: Lisa D. Belenson
Commission Number: DD133915
My Commission expires: 8/10/06

STATE OF FLORIDA)
 SS:
COUNTY OF BROWARD)

SWORN TO AND SUBSCRIBED before me, the undersigned authority,
by **SHARON L. SILLATO**, who appeared personally before me and took an
oath, who is personally known to me or who produced _____
as identification, on this
15th day of July, 2005.



Lisa D. Belenson
Commission # DD133915
Expires Aug. 10, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

Lisa D. Belenson
Notary Public, State of Florida
Print Name: Lisa D. Belenson
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