Patie 1060000 rule (Guille Guille Gui

Florida Department of State

Division of Corporations Public Access System

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.

(((H06000296424 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 Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY : Account Number : 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA/FOREIGN LP/LLP

CIC INVESTORS #55, LTD.

Certificate of Status	en e
Certified Copy	1
Page Count	03
Estimated Charge	\$1,061.25

Electronic Filing Menu Corporate Filing Menu

Help

12/15/2006 4-58 PM DEC-12-5000 15:02

HDU0000296424



CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

(Name of Limited Parmership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P. or ILLP. 2.5059 N.E. 18th Avenue (Street address of initial designated office) Fort Lauderdale, Florida 33334 3. Jeffrey D. Kastner, Esquire (Name of Registered Agent for Service of Process) (Name of Registered Agent Agent) Fort Lauderdale, Florida 33334
Fort Lauderdale, Florida 33334 3. Jeffrey D. Kastner, Esquire (Name of Registered Agent for Service of Process) 4. 5059 N.E. 18th Avenue (Fiorida street address for Registered Agent) Fort Lauderdale, Florida 33334
Fort Lauderdale, Florida 33334 3. Jeffrey D. Kastner, Esquire (Name of Registered Agent for Service of Process) 4. 5059 N.E. 18th Avenue (Fiorida street address for Registered Agent) Fort Lauderdale, Florida 33334
Fort Lauderdale, Florida 33334 3. Jeffrey D. Kastner, Esquire (Name of Registered Agent for Service of Process) 4. 5059 N.E. 18th Avenue (Fiorida street address for Registered Agent) Fort Lauderdale, Florida 33334
(Name of Registered Agent for Service of Process) 4. 5059 N.E. 18th Avenue (Fiorida street address for Registered Agent) Fort Lauderdale, Florida 33334
Fort Lauderdale, Florida 33334
(Florida street address for Registered Agent) Fort Lauderdale, Florida 33334
Fort Lauderdale, Florida 33334
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Signature of Registered Agent 6. 5059 N.E. 18th Avenue (Mailing address of initial designated office)
Fort Lauderdale, Florida 33334

Page 1 of 2

7. If limited partnership elects to be a limited liability limited partnership, check box \Box

H00000000000004

 Name and business address of each gene Name; 	ral partner: Business Address:
Flanigan's Enterprises, Inc.	
230494	Fort Lauderdale, Florida 33334
	O6 DEC SECRE IALLAH
	EC 18 AM
	# 8: 50 F STATE FLORIDA
9. Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more t filed by the Florida Department of State.)	
Signed this 15th day of D	ecember 2006
Signature of each general partner: FLANIGAN'S ENTERPRISES, INC. Liftur d. Lauhur a. CTO "Secklam"	
Johnston D. Kastuck, CFOVSechlary	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	.00 (\$965 Filing Fee and \$35 Registered Agent Fee) 2 of 2

4000000000000H