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TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LP/LLLP****LEON ALPER FAMILY LIMITED PARTNERSHIP, L.P.**

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**J. BRYAN**

APR 17 2008

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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
LEON ALPER FAMILY LIMITED PARTNERSHIP, L.P.**

1. The name of the limited partnership is **LEON ALPER FAMILY LIMITED PARTNERSHIP, L.P.** (the "Partnership").

2. The address of the office of the Partnership is **509 Arthur Godfrey Road, Miami Beach, Florida 33140.**

3. The name of the Registered Agent for service of process of the Partnership is **NEAL ALPER.**

4. The Florida street address for the Registered Agent is **509 Arthur Godfrey Road, Miami Beach, Florida 33140.**

6. The mailing address of the Partnership is **509 Arthur Godfrey Road, Miami Beach, Florida 33140.**

7. The latest date upon which the Limited Partnership is to be dissolved is **November 1, 2056.**

8. Names and addresses of General Partner:

NEAL D, L.L.C. #L08000032251  
509 Arthur Godfrey Road,  
Miami Beach, Florida 33140

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 15<sup>th</sup> day of April, 2008.

GENERAL PARTNER:  
NEAL D, L.L.C.

By: Neal Alper  
NEAL ALPER  
Managing Member

APR. 16. 2008 9:35AM C S C

NO. 745 P. 3

ACCEPTANCE OF APPOINTMENT AS RESIDENT AGENT

THE UNDERSIGNED, having been named as resident agent for **LEON ALPER FAMILY LIMITED PARTNERSHIP, L.P.**, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, does on behalf of the Partnership, hereby agree 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.

RESIDENT AGENT:

  
\_\_\_\_\_  
NEAL ALPER

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