

To: FL SECRET OF STATE  
Subject: CHARNAS FAMILY PARTNERSHIP, L.P.

From: Michele Holden

Friday, December 05, 2008 2:31 PM Page: 1 of 4

Division of Corporations

**A08000001002**

\*File Second\*  
(after Charnas  
Management, LLC)

Florida Department of State  
Division of Corporations  
Public Access System

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TALLAHASSEE, FLORIDA

Division of Corporations  
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Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA/FOREIGN LP/LLP**

**CHARNAS FAMILY PARTNERSHIP, L.P.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

**C. LEWIS**

DEC 08 2008

**EXAMINER**

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H08000268430 3

**CERTIFICATE OF LIMITED PARTNERSHIP OF**  
**CHARNAS FAMILY PARTNERSHIP, L.P.**  
**a Florida limited partnership**

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620 of the Florida Statutes, does hereby state the following:

1. The name of the Partnership is:  
**CHARNAS FAMILY PARTNERSHIP, L.P.**
2. The address of the office of the Partnership is:  
  
13419 Blytheheld Terr.  
Bradenton, FL 34202
3. The name and address of the agent for service of process on the Partnership is as follows:  
  
Eliot Charnas  
13419 Blytheheld Terr.  
Bradenton, FL 34202
4. The names and business address of the general partner is as follows:  
  
**CHARNAS MANAGEMENT, LLC**  
13419 Blytheheld Terr.  
Bradenton, FL 34202
5. The mailing address of the Partnership is:  
  
13419 Blytheheld Terr.  
Bradenton, FL 34202
6. The effective date of this Certificate of Limited Partnership shall be the effective date of the filing of the certificate of limited partnership with the Department of State.

H08000268430 3

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Friday, December 05, 2008 2:31 PM Page: 3 of 4

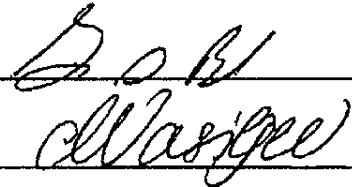
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The execution of this certificate by the undersigned general partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

**IN WITNESS WHEREOF**, this Certificate of Limited Partnership has been executed by ELIOT CHARNAS, as Manager of CHARNAS MANAGEMENT, LLC, a Florida limited liability company, the general partner of CHARNAS FAMILY PARTNERSHIP, L.P., a Florida limited partnership, this 20<sup>th</sup> day of November, 2008.

"GENERAL PARTNER"

WITNESSES AS TO:  
Eliot Charnas, Manager

  
\_\_\_\_\_  
Bob Wasiger

  
\_\_\_\_\_  
CHARNAS MANAGEMENT, LLC,  
a Florida limited liability company  
By: Eliot Charnas, as Manager

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H08000268430 3

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Friday, December 05, 2008 2:31 PM Page: 4 of 4

H08000268430 3

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named to accept service of process for CHARNAS FAMILY PARTNERSHIP, L.P., at the place designated in the foregoing Certificate of Limited Partnership, I, ELIOT CHARNAS, hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.1117, Florida Statutes.

  
\_\_\_\_\_  
ELIOT CHARNAS  
Registered Agent

Date:

November 20, 2008

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