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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : PROSKAUER ROSE LLP
Account Number : 074673001063
Phone : (561) 995-4704
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L. SELLERS

DEC 18 2009

EXAMINER

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA/FOREIGN LP/LLLP

Leslie ArtView LLLP

Certificate of Status	1
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**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the Limited Partnership or Limited Liability Limited Partnership:

Leslie ArtView LLLP

2. The street and mailing address of the initial designated office:

c/o Lillian Schneider
1089 South Ocean Boulevard
Palm Beach, Florida 33480

3. Name of Registered Agent for Service of Process:

Lillian Schneider

4. Florida street address for Registered Agent:

1089 South Ocean Boulevard
Palm Beach, Florida 33480

I, Lillian Schneider, 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.


Lillian Schneider

5. The limited partnership elects to be a limited liability limited partnership.

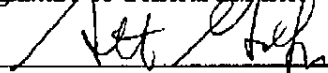
6. Name and business address of each general partner:

Leslie ArtView LLC
c/o Lillian Schneider
1089 South Ocean Boulevard
Palm Beach, Florida 33480

7. The Effective date shall be the date of filing.

Signed this 16th day of December, 2009.

Signature of General Partner:


Scott L. Goldberger, Authorized Representative of
Leslie ArtView LLC, a Delaware limited liability
company, General Partner

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