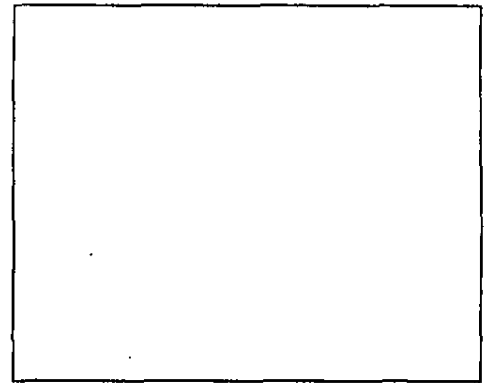


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ENTITY NAME:

CMS FAMILY ENTERPRISES, LLLP

CK# 14617 FOR \$ 2122.50 (\$1061.25 for this filing)

PLEASE FILE THE ATTACHED CERTIFICATE OF LIMITED PARTNERSHIP &  
RETURN THE FOLLOWING:

XXX CERTIFIED COPY

\_\_\_ STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

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

FILED  
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TALLAHASSEE, FLORIDA

1. CMS FAMILY ENTERPRISES, LLLP  
(Name of Limited Partnership or Limited Liability Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
2. 13611 Deering Bay Drive, #1402, Coral Gables, FL 33158  
(Street Address of initial designated office)
3. Atrium Registered Agents, Inc.  
(Name of Registered Agent for Service of Process)
4. 1500 San Remo Avenue, Suite 125, Coral Gables, Florida, 33146  
(Florida street address for Registered Agent)

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.

Atrium Registered Agents, Inc.

By:   
Malcolm H. Neuwahl, President

6. 13611 Deering Bay Drive, #1402, Coral Gables, FL 33158  
(Mailing address of the initial designated office)
7. If the limited partnership elects to be a limited liability limited partnership check:  
  X   Yes        No
8. Name and business address of the general partner:

CMS Management, LLC  
c/o Robert E. Schur  
13611 Deering Bay Drive, #1402  
Coral Gables, FL 33158

RES Family Enterprises, LLLP  
Page 2

9. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date the document is  
filed by the Florida Department of State.)

Signed this 7<sup>th</sup> day of November, 2012.

Signature of each general partner: The General Partner submits this document and affirms that the facts stated herein are true. The General Partner is aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

RES MANAGEMENT, LLC  
a Florida Limited Liability company  
General Partner

By: Robert E. Schur  
Robert E. Schur, Manager

By: David Schur  
David Schur, Manager

By: Mark Altschul  
Mark Altschul, Manager