



THE UNITED STATES
CORPORATION
COMPANY

A32525

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
98 MAR -9 PM 2:42

ACCOUNT NO. : 072100000032

REFERENCE : 732884 4311473

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : March 9, 1998

ORDER TIME : 9:59 AM

ORDER NO. : 732884-005

CUSTOMER NO: 4311473

CUSTOMER: Ms. Jackie J. Gerstenfeld
Stearns Weaver Miller Weissler
Museum Tower, Suite 2200
150 West Flagler Street
Miami, FL 33130

000002450370--8
-03/09/98--01041--021
*****87.50 *****87.50

000002450370--8
-03/09/98--01041--022
***1750.00 ***1750.00

DOMESTIC AMENDMENT FILING

NAME: NEWFIELD PARTNERS, LTD.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Glisar

EXAMINER'S INITIALS:

RECEIVED
98 MAR -9 AM 11:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

3/9/98

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared, Ludovico Manfredi, as President of **NEWFIELD (G.P.) INC.**, a Florida corporation, and the sole general partner of **NEWFIELD PARTNERS, LTD.**, a Florida limited partnership (the "Partnership"), who states as follows:

1. The aggregate capital contributions made by the Limited Partners of the Partnership to the Partnership is \$5,550,000.00.
2. It is not anticipated that the Limited Partners will make any additional contributions to the capital of the Partnership other than as set forth in Number 1, above.

NEWFIELD (G.P.) INC., a Florida corporation, as General Partner

By: 
Ludovico Manfredi, President

The foregoing instrument was acknowledged before me this 2 day of MARCH, 1998 by Ludovico Manfredi, as President of **NEWFIELD (G.P.) INC.**, a Florida corporation, and the sole general partner of **NEWFIELD PARTNERS, LTD.**, a Florida limited partnership, on behalf of the Partnership.

Personally known OR Produced Identification X

Type of Identification Produced FLA. DL # M516-523-61-260-0

Print or Stamp Name: _____
Notary Public, State of Florida at Large
Commission No.: _____
My Commission Expires: _____



