

A95000000013

SCIARRETTA & SCHNER, P.A.
ATTORNEYS AT LAW
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

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Business and Taxation Planning
Civil and Commercial Litigation
Condominium and Homeowners Assoc.
Probate Administration
Trusts and Estate Planning

VIA EXPEDITED DELIVERY

December 28, 1994

Secretary of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

MOST PERSONAL AND CONFIDENTIAL
ATTN: MS. AGNES BUNDICK

Re: IDAJAC L.L.C., a Limited Liability Company and
JACIDA Limited Partnership

Dear Ms. Bundick:

In furtherance of our conversation of December 28, 1994, enclosed you will find for filing the original and one (1) copy of the Certificate of Limited Partnership, Affidavit and Acceptance of Agent for the above referenced limited partnership.

Also enclosed for filing you will find the original and one (1) copy of the Articles of Organization, Affidavit and Certificate for the above-referenced Limited Liability Company.

Our check in the amount of \$2,131.25 is enclosed as well. This check represents filing fees of \$285.00 and \$52.50 for one certified copy of the Articles of Organization of IDAJAC L.L.C., a Limited Liability Company. This check also includes \$1,750.00 as filing fee for JACIDA Limited Partnership along with \$8.75 for a Certificate for same and \$35.00 for Designation of the Registered Agent.

It is imperative that the IDAJAC L.L.C. ~~Limited Liability Company~~ be established PRIOR TO THE CERTIFICATION OF THE JACIDA LIMITED PARTNERSHIP. IT IS EQUALLY IMPORTANT THAT BOTH ENTITIES BE CERTIFIED ON THIS DATE.

Finally, enclosed you will find a prepaid, self-addressed UPS Envelope in which you may return the certified documents to us.

8000001370498
-01/05/95--01013--001
***2131.25 ***1793.75

1785.00-PF
8.75-CWS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 DEC 27 PM 2:38

Name	
Availability	
Updater	GSH
Self-addressed UPS Envelope	GSH
Acknowledgement	GSH
W. P. Verifier	

A95-13

Ms. Agnes Bundick
December 28, 1994
Page Two

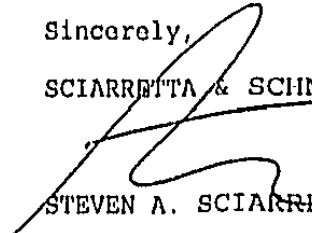
If I may be of further assistance to you as regards this matter, please do not hesitate to contact me at the toll-free number set forth above.

Your prompt attention to this matter is most greatly appreciated.

Our best wishes for a healthy and Happy New Year.

Sincerely,

SCIARRETTA & SCHNER, P.A.


STEVEN A. SCIARRETTA, ESQ.

SAS:ls
Enclosures

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DIVISION OF CORPORATIONS
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**CERTIFICATE OF LIMITED PARTNERSHIP OF
JACIDA LIMITED PARTNERSHIP**

a Florida Limited Partnership

The undersigned general partners desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620.108 of the Florida Statutes, hereby state the following:

1. The name of the Partnership is JACIDA LIMITED PARTNERSHIP
2. The address of the office of the Partnership is
4040 W. Palmdale Drive, # 105,
Pompano Beach, FL 33069
3. The name and address of the agent for service of process on the Partnership are
IDAJAC, L.C.
4040 W. Palmdale Drive, # 105
Pompano Beach, FL 33069
4. The name and business address of the sole general partner are as follows:
IDAJAC, L.C. (a Florida limited liability company) *L94000000728*
4040 W. Palmdale Drive, # 105
Pompano Beach, FL 33069
5. The mailing address of the Partnership is
4040 W. Palmdale Drive, # 105
Pompano Beach, FL 33069
6. The latest date upon which the Partnership shall dissolve is December 27, 2044
7. The effective date of this Certificate of Limited Partnership shall be the date this Certificate is filed with the Florida Department of State

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the sole general partner of JACIDA LIMITED PARTNERSHIP this 27th day of December, 1994.

GENERAL PARTNER:

IDAJAC, L.C.

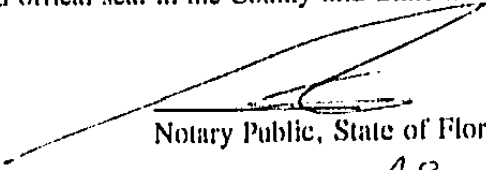
By: *Jack Diener*
Jack Diener, Trustee,
the Jack Diener Living Trust
Managing Member

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
NOV 27 1994

STATE OF FLORIDA }
 } ss:
COUNTY OF PALM BEACH }

The foregoing instrument was acknowledged before me this 27th day of December, 1994, by Jack Diener, Trustee, the Jack Diener Living Trust, who represented himself to be person signing in the capacity set forth above, who is personally known to me or who has produced Florida State or _____ State Driver's license, Number D 560 - 400-14-2278 identification and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 27th day of December, 1994.


Notary Public, State of Florida

Name: Steven A. Sciarretta

(SEAL)

My commission expires:



STEVEN A. SCIARRETTA
MY COMMISSION # CC 214668 EXPIRES
August 14, 1998
BONDED THRU TROY FAIN INSURANCE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 DEC 27 PM 2:34

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for JACIDA LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all Florida Statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT
IDAJAC L.C.

By: Jack Diener
Jack Diener, Trustee,
the Jack Diener Living Trust
Managing Member

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 DEC 27 PM 2:34

STATE OF FLORIDA)
)
COUNTY OF PALM BEACH)

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned personally appeared Jack Diener, Trustee, the Jack Diener Living Trust, as the Managing Member, in the name and behalf of IDAJAC L.C. constituting the sole general partner of JACIDA LIMITED PARTNERSHIP, a Florida limited partnership (hereinafter referred to as the "Partnership"), who upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is as follows: \$990

2. The amount of additional capital contributions anticipated to be contributed by the limited partners is as follows: \$1,540,000

FURTHER AFFIANT SAYETH NOT.

General Partner

IDAJAC L.C.

By: Jack Diener
Jack Diener, Trustee,
the Jack Diener Living Trust
Managing Member

Date: December 27, 1994

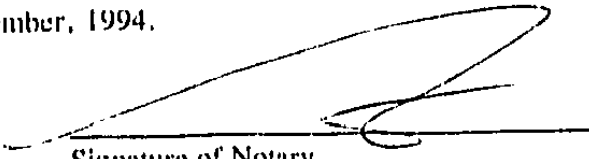
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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STATE OF FLORIDA)
) ss.
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 27th day of December, 1994, by _____, who represented himself or herself as the person signing in such capacity, who is personally known to me or who has produced Florida State or _____ State Driver's license, Number 2-562-430-14-227-0, as identification and who did take an oath.

Executed this 27th day of December, 1994.

SEAL



Signature of Notary

STEVEN A. SCIARRETTA
Name of Notary Printed

Notary Public
Title (e.g.: Notary Public) Printed

Serial Number, Commission Number
(if any) Printed



STEVEN A. SCIARRETTA
MY COMMISSION # CC 214668 EXPIRES
August 14, 1996
BONDED THRU TRU FARM INSURANCE, INC.

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
J. Bruce Mathias
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 NOV 15 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
1a. DOCUMENT #
A95000000013

JACIDA LIMITED PARTNERSHIP

96-AR

CM

Mailing Address
4040 W. PALMAIRE DR., #105
POMPANO BEACH FL 33069

Principal Office Address
4040 W. PALMAIRE DR., #105
POMPANO BEACH FL 33069

2. New Mailing Address, if Applicable

State, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, if Applicable

State, Apt. #, etc.

City, State & Zip

If above addresses are incorrect in any way, file through the corrected information and enter correct address in Block 2 and the 2a.

3. Date Formed or Registered in the State of
FLORIDA 12/27/1994

3a. Date of Last Report
02/16/1995

4. State or Country of Formation
FL

5a. Capital Contributed as Shown
on Record
\$1,540,990.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FET Number
38-7129237

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$0.75 Additional Fee required
for a Certificate of Status

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee: \$130.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$52.50 + \$130.75) AND NO MORE THAN \$570.25 (\$437.50 + \$130.75).
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

IDAJAC, L.C.
4040 W. PALMAIRE DR., #105
POMPANO BEACH FL 33069

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Applicable)

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

IDAJAC, L.C.

4040 W. PALMAIRE DR.,

POMPANO BEACH FL 33068

L94000000728

3000001646243
-11/27/95--01112--013
****576.25 ****576.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(g), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(1)(g) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as a signature under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee, or authorized to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

9/25/95

Typed or Printed Name of General Partner Signing Form

DR. JACK DIENER
4040 PALMAIRE DR. W.
#105
POMPANO BEACH, FL 33069

Telephone Number

2ND NOTICE: 60 DAYS NOTICE OF INTENT TO REVOKE
 THIS LIMITED PARTNERSHIP WILL BE REVOKED IF REPORT IS NOT FILED BY APRIL 12, 1995

FILED

95 FEB 15 PM 2:58

FLORIDA

LIMITED PARTNERSHIP
 ANNUAL REPORT
 1995



1a. DOCUMENT #
A95000000013

JACIDA LIMITED PARTNERSHIP

4040 W. PALMAIRE DR. #105
 POMPANO BEACH FL 33069

4040 W. PALMAIRE DR. #105
 POMPANO BEACH FL 33069

2. To A Meeting Address of Agent

2a. To A Meeting Address of Agent

3. Filing Date
12/27/1994

3a. Filing Date

4. State
FL

5a. Capital Contribution
\$1,540,990.00

5b. Annual Report Filing Fee
576.25 (including 7%)

6. Filing Fee
327.19337

Approved For
 Filing Agent

7. Additional Fee
 for Certificate of Status ☐

8. THE BASIC ANNUAL REPORT FILING FEE IS FIGURED AT THE RATE OF \$7.00 PER THOUSAND ON THE ACTUAL CAPITAL CONTRIBUTION PLUS A SUPPLEMENTAL FEE OF \$138.75 PURSUANT TO § 607.193, FLORIDA STATUTES. THE FEES SHALL BE NO LESS THAN \$191.25 + \$62.50 + \$138.75 AND NO MORE THAN \$576.25 + \$138.75. For questions concerning fees, please call (904) 487-6056. Please submit your 1995 annual report with a check payable to the Department of State in U.S. funds through a U.S. bank.

9. Name and Address of Current Registered Agent

IDAJAC, L.C.
 4040 W. PALMAIRE DR., #105
 POMPANO BEACH FL 33069

10. If changed, new registered agent

10a. I, the undersigned, being a resident of the State of Florida, do hereby certify that I am the registered agent of the limited partnership named above, and that I am qualified to receive service of process on behalf of the partnership. I am not a partner in the partnership, and I am not a partner in any other partnership. I am not a partner in any other partnership. I am not a partner in any other partnership.

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name of General Partner	11a. Address of General Partner (if not same as office of partnership)	11b. City and State	11c. Registration Document Number
IDAJAC, L.C.	4040 W. PALMAIRE CR.,	POMPANO BEACH FL	L94000000728

600001409386
 -02/20/95--01032--0005
 ****7025 ****5025

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I, the undersigned, being a resident of the State of Florida, do hereby certify that I am the registered agent of the limited partnership named above, and that I am qualified to receive service of process on behalf of the partnership. I am not a partner in the partnership, and I am not a partner in any other partnership. I am not a partner in any other partnership.

Jack Diemer
 JACK DIEMER

2/10/95
 365 915985