

CORPORATION INFORMATION
SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0191 FAX

000-342-0086

CSC networks

A95000000126

MAIL TO:
P.O. BOX 5028
TALLAHASSEE, FL 32304

ACCOUNT NO. : 072100000032

REFERENCE : 529987 4656C

AUTHORIZATION :

Patricia Payne

COST LIMIT : \$ 148.75

ORDER DATE : January 25, 1995

ORDER TIME : 9:39 AM

ORDER NO. : 529987

CUSTOMER NO: 4656C

CUSTOMER: Joan Dalie, Legal Asst
GREENBERG TRAURIG HOFFMAN
ROSEN & QUENTEL, P.A.
Suite 310 East
777 S. Flagler Drive
West Palm Beach, FL 33401

RECEIVED
95 JAN 25 AM 10:27
DIVISION OF CORPORATIONS

41000001 08:11:14

DOMESTIC FILING

NAME: CLOSET TEAM, LTD.

ARTICLES OF INCORPORATION
☒ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☒ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol L. Davis

EXAMINER'S INITIALS:

nk

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 AM 11:12

CERTIFICATE OF LIMITED PARTNERSHIP

In order to form a limited partnership under the laws of the State of Florida, the undersigned is hereby certifying and swears to the following:

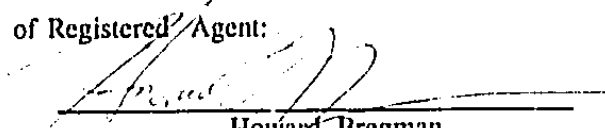
- I. The name of the limited partnership is CLOSET TEAM, LTD.
- II. The business address of the limited partnership is as follows:

17556 Lake Estates Drive
Boca Raton, Florida 33496

- III. The name of the Registered Agent for Service of Process is Howard Bregman.
- IV. The Florida street address for the Registered Agent is:

777 S. Flagler Drive, Suite 310-East
West Palm Beach, FL 33401

- V. Signature of Registered Agent:


Howard Bregman

- VI. The mailing address of the limited partnership is:

17556 Lake Estates Drive
Boca Raton, Florida 33496

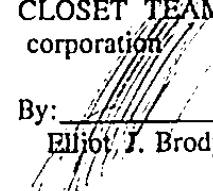
- VII. The latest date upon which the partnership is to dissolve is December 31, 2044.

- VIII. The name and address of the sole general partner is:

179400087394 CLOSET TEAM, INC., a Florida corporation
17556 Lake Estates Drive
Boca Raton, Florida 33496

Signed this 21st day of January, 1995.

CLOSET TEAM, INC., a Florida
corporation

By: 
Elliot J. Brody, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 AM 11:12

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting the sole general partner of CLOSET TEAM, LTD., a Florida limited partnership, hereby certifies:

I. This Affidavit accompanies a Certificate of Limited Partnership filed with the Secretary of State simultaneously herewith.

II. The amount of capital contributions of the limited partners to date is One Thousand Dollars (\$1,000.00).

III. The total amount contributed and anticipated to be contributed by the limited partners at this time totals One Thousand Dollars (\$1,000.00).

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Sole General Partner:

CLOSET TEAM, INC.,
a Florida corporation

By:

[Signature]
Elliott J. Brody
Its President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 AM 11:13

STATE OF FLORIDA

COUNTY OF PALM BEACH

Sworn to and subscribed before me this 24 day of January, 1995.



[Signature]
Notary Public, State of Florida

Print Name: JOAN V. DALIE

My Commission Expires: _____

My Commission No.: _____

☒
☐

Personally known to me or has

Produced _____
identification

as

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
Sandra Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 OCT -3 PH 12: 30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000126

CLOSET TEAM, LTD.

Mailing Address

17556 LAKE ESTATES DRIVE
BOCA RATON FL 33496

Principal Office Address

17556 LAKE ESTATES DRIVE
BOCA RATON FL 33496

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

3. Date Formed or Registered to Do Business in
FLORIDA
01/25/1995

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Shown
on Record
\$1,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FIC Number

65-0536718

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

See "A" Additional Fee, separate
form at website of Statute

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
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

BREGMAN, HOWARD
17556 LAKE ESTATES DRIVE
BOCA RATON FL 33496

10. If changed, new Registered Agent/Office

Name

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

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, 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)

CLOSET TEAM, INC.

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

17556 LAKE ESTATES DR

11b. City, State & Zip Code

BOCA RATON FL 33496

11c. Registration/
Document Number

P84000067396

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

12. I do hereby certify that the information supplied on this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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. My signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report pursuant to chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner

ELLIOT J. BREADY

Telephone Number

(407) 483-6414

0007525

CR2E03 (6/95)