CORPORATION INFORMATION
SERVICES, INC
1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-8091 FAX

800-342-8036

csc networks

A95000000126

Mail To:
P.O. Box 5828
Tallahassee, FL 32314

ACCOUNT NO. : 072100000032

REFERENCE : 529987 4656C

AUTHORIZATION : Patricia Pezzito

COST LIMIT : $ 140.75

RECEIVED
95 JAN 25 AM 10:27
DIVISION OF CORPORATION

ORDER DATE : January 25, 1995

ORDER TIME : 9:39 AM

ORDER NO. : 529987

CUSTOMER NO: 4656C

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

DOMESTIC FILING

NAME: CLOSET TEAM, LTD.

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

____ APTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol L. Davis

EXAMINER'S INITIAL: MK

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 25 AM 11: 1?

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:

P94000087394

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

Signed this 24th day of January, 1995.

CLOSET TEAM, INC., a Florida corporation

By: ______________________
Elliot J. Brody, President

JFB\HECTERH\54345 1115093 110105\01/13/95

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.

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

Sole General Partner:

CLOSET TEAM, INC.,
a Florida corporation

By: _____
Elliot J. Brody
Its President

STATE OF FLORIDA

COUNTY OF PALM BEACH

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

_____
Notary Public, State of Florida
Print Name: JOANN V. DALIE
My Commission Expires:

_____
My Commission No.: _____

(Notary Seal)

[✓] Personally known to me or has
[ ] Produced _____ as identification

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 Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 OCT -3 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

CLOSET TEAM, LTD.

1a. DOCUMENT # A95000000126

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, line through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address If Applicable
Suite, Apt. #, etc.
City, State & Zip

2a. New Principal Office
Suite, Apt. #, etc.
City, State & Zip

000001650330- -10/11/95--01058--005 ****191.25 ****191.25

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. FEI Number 65-0536718

7. CERTIFICATE OF STATUS REQUIRED
Applied For
Not Applicable
$8.75 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 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 $191.25 ($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)
Suite, 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
CLOSET TEAM, INC.	17556 LAKE ESTATES DR	BOCA RATON FL 33496	P94000087396

No ar dc

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 with this filing 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 and that 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 as required by chapter 620, Florida Statutes.

SIGNATURE ______ DATE 9-21-95

Typed or Printed Name of General Partner Signing Form ELLIOT J. BRODY Telephone Number (407) 483-6414

CR2E003 (6/95)

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