Corporation Information
Services Inc
1201 Hays Street
Tallahassee FL 32301
904 222-9171
904-222-0891 FAX

800-342-8060

A 95000000166

csc networks

Mail To
P O Box 5828
Tallahassee FL 32314

ACCOUNT NO. : 072100000032

REFERENCE : 533652 10831A

AUTHORIZATION :

COST LIMIT : 9 PREPAID

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -1 AM 11:29

ORDER DATE : February 1, 1995

ORDER TIME : 9:53 AM

ORDER NO. : 533652

CUSTOMER NO: 10831A

RUSH WILL WAIT

CUSTOMER: Gerald Greenspoon, Esq
GREENSPOON MARDER HIRSCHFELD
& RAFKIN
Suite 700
100 West Cypress Creek
Ft. Lauderdale, FL 33309

000001 088250
-02/06/95-01050--006
***1890.00 ***1890.00

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DIVISION OF CORPORATION

DOMESTIC FILING

***2 CERTIFIED COPIES

NAME: SAUSALITO LIMITED PARTNERSHIP

C. TAX
FILING 43.75
R. AGENT FEE 35.00
D. COPY 105.00
BANK
BALANCE DUE
PAID

_____ ARTICLES OF INCORPORATION
XXXXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXXXXX CERTIFIED COPY
_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS: KA

2/1/95

CERTIFICATE OF LIMITED PARTNERSHIP
OF
SAUSALITO LIMITED PARTNERS

The Limited Partnership is organized under the laws of the State of Florida, and its business shall be conducted under the name of SAUSALITO LIMITED PARTNERS. The principal offices of the Partnership will be located at 100 West Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

The Registered Agent for the Partnership is:

Gerald Greenspoon, Esq.
Greenspoon, Marder, Hirschfeld & Rafkin, P.A.
100 West Cypress Creek Road, Suite 700
Fort Lauderdale, Florida 33309

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TALLAHASSEE, FLORIDA
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GERALD GREENSPOON, Registered Agent

The mailing address for the Limited Partnership shall be:

c/o Berkovits & Co. P.A.
8211 W. Broward Boulevard, Suite 340
Plantation, FL 33324
~~Miami Beach, Florida 33139~~

The latest date upon which the Limited Partnership is to be dissolved is January 26, 2025.

The General Partner of the Limited Partnership is:

MARBA, INC., A Delaware corporation
1222 Mackay Street
Montreal, Quebec, Canada H3G 2H4

F95000005019

Signed this 30th day of January, 1995.

MARBA, INC.,
a Delaware corporation, General Partner

By: _____
Sam Luft, President

AFFIDAVIT OF CAPITAL CONTRIBUTION

The undersigned constituting all of the General Partners of SAUSALITO LIMITED PARTNERS, a Florida limited partnership, certify as follows:

The amount of capital contributions to date of the limited partners is $ 525,000.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $ 825,000 (Eight Hundred and Twenty Five Thousand)

FURTHER AFFIANT SAYETH NOT.

Signed this 30th day of January, 1995.

Under the penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
95 FEB -1 AM 8:29

MARBA, INC., a Delaware Corporation
General Partner

By: _____
Sam Luft, President

G:\GG\9?35.Sausalito\LP

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
95 DEC 21 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

3AUSALITO LIMITED PARTNERS

1a. DOCUMENT #
A95000000166

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

Mailing Address	Principal Office Address
C/O BERKOVITS & CO. P.A. 8211 WEST BROWARD BLVD., SUITE 340 MIAMI BEDACH FL 33324	100 WEST CYPRESS CREEK ROAD, SUITE 700 FORT LAUDERDALE FL 33309

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

3. Date Formed or Registered to Do Business in FLORIDA: 02/01/1995

3a. Date of Last Report: N/A

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on Record: $825,000.00

5b. Amount of Capital Contributions in FLORIDA to date: 825000

6. FEI Number: 65-0553771

7. CERTIFICATE OF STATUS REQUIRED
Applied For
Not Applicable
$8.75 Additional Fee required [illegible] 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 607.193, 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.

12-29

9. Name and Address of Current Registered Agent

GREENSPOON, GERALD ESQ.
C/O GREENSPOON, MARDER, ET AL
100 WEST CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE FL 33309

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
MARBA, INC.	1222 MACKAY STREET	MONTREAL, QUE., CA	F93000005019

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 truly stated and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 12/5/95

Typed or Printed Name of General Partner Signing Form _____ Telephone Number _____

CR2E003 (6/95)

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