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FEB-03-95 FRI 15:01

G Y V-F & S P.A. MIAMI

FAX NO. 3053780010

P.01

2/03/95

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM

2:05 PM

((H95000001433))

ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: VALDEZ-PAULI, HISCORFF, KRIS & MAND

DEPARTMENT OF STATE

STATE OF FLORIDA

409 EAST GAINES STREET

TALLAHASSEE, FL 32399

FAX: (904) 922-4000

CONTACT: ROSA MARIA ANCHETA

PHONE: (305) 376-6037

FAX: (305) 376-6010

((H95000001433))

DOCUMENT TYPE: FLORIDA LIMITED PARTNERSHIP

NAME: 1244 PENN ASSOCIATES, LTD.

FAX AUDIT NUMBER: H95000001433

CURRENT STATUS: REQUESTED

DATE REQUESTED: 02/03/1995

TIME REQUESTED: 14:05:19

CERTIFIED COPIES: 1

CERTIFICATE OF STATUS: 1

NUMBER OF PAGES: 5

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$148.75

ACCOUNT NUMBER: 076077002561

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H95000001433))

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

FILED
1995 FEB -3 PM 4:00
TALLAHASSEE, FLORIDA

00:00:00

00:00:00

1953 074

FAX AUDIT NO.: H95000001433

CERTIFICATE OF LIMITED PARTNERSHIP

OF

1244 PENN ASSOCIATES, LTD.

The undersigned, acting as organizer of a Limited Partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act hereby adopts the following certificate for such Limited Partnership:

1. The name of the Limited Partnership is 1244 PENN ASSOCIATES, LTD.

2. (a) The address of the office of the Partnership at which place the records shall be maintained is:

230 Fifth Street
Miami Beach, Florida 33139

(b) The name and address of the Partnership's agent for service of process is:

Valdes-Fauli Corporate Services, Inc.
c/o Gunster, Yoakley, Valdes-Fauli & Stewart, P.A.
34th Floor - One Biscayne Tower
2 S. Biscayne Blvd.
Miami, FL 33131

3. The name and address of the General Partner is:

1244 PENN ASSOCIATES, INC.
230 Fifth Street
Miami Beach, Florida 33139

THIS DOCUMENT PREPARED BY:
Mark J. Schaefer, Esq.
Gunster, Yoakley, Valdes-Fauli &
Stewart, P.A.
34th Floor - One Biscayne Tower
2 S. Biscayne Blvd.
Miami, Florida 33131
Tel: (305) 376-6000
Florida Bar No.: 0710430

TALLAHASSEE, FLORIDA

1995 FEB -3 PM 4: 00

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FAX AUDIT NO. H95000001433

FAX AUDIT NO.: H95000001433

4. The mailing address for the Limited Partnership is:

230 Fifth Street
Miami Beach, Florida 33139

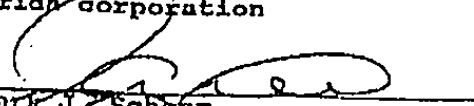
5. The term of the Partnership shall commence on the date of filing of this Certificate with the Secretary of State of Florida and shall continue until December 31, 2015, unless sooner terminated as provided in the Articles of Limited Partnership Agreement.

IN WITNESS WHEREOF, the undersigned General Partner has hereto executed this Certificate as of the 3rd day of February, 1995.

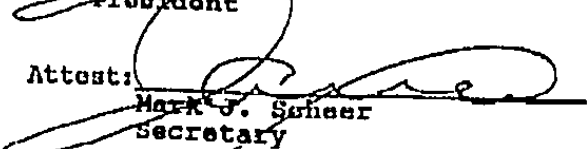
GENERAL PARTNER:

1244 PRNN ASSOCIATES, INC.,
a Florida corporation

By:


Mark J. Scheer
President

Attest:


Mark J. Scheer
Secretary

[CORPORATE SEAL]

FILED
1995 FEB - 3 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB-03-95 FRI 15:02

G Y V-F & S P.A. MIAMI

FAX NO. 3053788010

P.04

FAX AUDIT NO.: 895000001433

STATE OF FLORIDA

COUNTY OF DADE

The foregoing instrument was acknowledged before me this 3rd day of February, 1995 by Mark J. Scheer as President and Secretary of 1244 PENN ASSOCIATES, INC., a Florida corporation, on behalf of the corporation, and who is personally known to me, or has produced and as identification and did/did not take an oath.



ROSA M. ARCHETA
My Commission CC421027
Expires Nov. 18, 1996
Bonded by AND
900-662-0678

Rosa M. Archeta
Print Name: ROSA M. ARCHETA
NOTARY PUBLIC
State of Florida

My Commission Expires:

Having been named to accept service of process for the above stated Limited Partnership, at the place designated in this Certificate of Limited Partnership, I hereby act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

VALDES-PAULI CORPORATE SERVICES,
INC.

By: Mark J. Scheer
Mark J. Scheer
Vice President

Dated: February 3, 1995

FILED
1995 FEB -3 PM 4:00
TALLAHASSEE, FLORIDA

FAX AUDIT NO. H95000001433

AFFIDAVIT

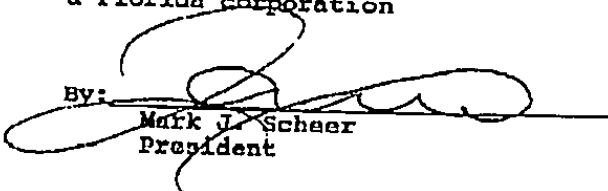
STATE OF FLORIDA }
COUNTY OF DADE } : SS

BEFORE ME, a Notary Public, personally appeared Mark J. Scheer as President of 1244 PENN ASSOCIATES, INC. (the "Affiant"), who, after first being duly sworn, under oath, deposes and states that:

1. Affiant is the duly appointed Authorized Officer of 1244 PENN ASSOCIATES, INC., a Florida corporation (the "Corporation").
2. The Corporation is the General Partner of a Limited Partnership to be formed under the Florida Revised Uniform Limited Partnership Act under the name 1244 PENN ASSOCIATES, LTD.
3. The capital and anticipated contribution of the initial sole limited partner is \$ 1,000.00.
4. The Affiant is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements made in an instrument of this nature. Affiant further certifies that he has read the full facts of this affidavit and understands its contents.

FURTHER AFFIANT SAYETH NAUGHT.

1244 PENN ASSOCIATES, INC.,
a Florida corporation

By: 

Mark J. Scheer
President

FEB-03-95 FRI 15:04

G Y V-F & S P.A. MIAMI

FAX NO. 3053788010

P.00

FAX AUDIT NO.: H95000001433

STATE OF FLORIDA

COUNTY OF DADE

The foregoing instrument was acknowledged before me this 3rd day of February, 1995 by Mark J. Scheer as President of 1244 PENN ASSOCIATES, INC., a Florida corporation, on behalf of the corporation, and who is personally known to me or has produced _____ as identification and did/did not take an oath.



ROSA M. ANCHETTA
My Commission 00421027
Expires Nov. 16, 1998
Bonded by ANG
001-842 6878

Rosa M. Anchetta
Print Name: Rosa M. ANCHETTA
NOTARY PUBLIC
State of Florida

My Commission Expires:

11\PALEGAL\RA\BRIDGE.GOV\CHET.LP

FILED
1995 FEB -3 PM 4:00
TALLAHASSEE, FLORIDA

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 Mathiam
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 DEC 18 PM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000182

1244 PENN ASSOCIATES, LTD.

Mailing Address
230 FIFTH ST.
MIAMI BEACH FL 33139

Principal Office Address
230 FIFTH ST.
MIAMI BEACH FL 33139

2. First Mailing Address, If Applicable

State Apt # etc

City, State & Zip

70000 1670257
12/26/95-01029-006

2a. How Principal Office

****19125line ****191.25

State Apt # etc

City, State & Zip

3. Date Formed or Registered to Do Business in
FLORIDA
02/03/1995

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

65-0579076

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$5.75 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 \$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

VALDES-FAULI CORPORATE SERVICES, INC.
C/O GUNSTER, YOAKLEY, VALDES-FAULI
2 SOUTH BISCAYNE BLVD., 34TH FLOOR
MIAMI FL 33131

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)

1244 PENN ASSOCIATES, INC.

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

230 FIFTH ST.

11b. City, State & Zip Code

MIAMI BEACH FL 33139

11c. Registration/
Document Number

P95000009379

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

12. I 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)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information included on this annual report is true and accurate and that my signature shall have the same legal effect 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 650, Florida Statutes.

SIGNATURE

DATE

11/2/95

Typed or Printed Name of General Partner Signing Form

Telephone Number

CR2E003 (6/95)