CAPITAL CONNECTION, INC.
417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: P.O. Office Box 10349, Tallahassee, FL 32302

A9500000472

RE: Metropolitan Associates Ltd.

NAME ____________
FIRM ____________
ADDRESS ____________

PHONE (   ) ____________

Service: Top Priority ______ One Day Service   Regular ______ Two Day Service

To us via ______ Return via ______

Mailer No.: ______ Express Mail No. ______

State Fee $ ______ Our $ ______

		FEE	DISBURSED
	Capital Express™		
	Art. of Inc. File		
	Corp. Record Search		
✓	Ltd. Partnership File		
	Foreign Corp. File		
	Cert. Copy(s)		
✓	Photo Copy		
	Art. of Amend. File		
	Dissolution/Withdrawal		
✓	CUS - g.s. (2)		
	Fictitious Name File		
	Name Reservation		
	Annual Report/Reinstatement		
	Reg. Agent Service		
	Document Filing		
	Corporate Kit		
	Vehicle Search		
	Driving Record		
	Document Retrieval		
	UCC 1 or 3 File		
	UCC 11 Search		
	UCC 11 Retrieval		
	File No.'s, ____ Copies	**1825.00	*1025.00
	Courier Service		
	Shipping/Handling		
	Phone ( )		
	Top Priority		
	Express Mail Prep.		
	FAX ( ) pgs.		
	SUBTOTALS		

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10: 14

800001418218
-03/30/95--01017--017
**1825.00 *1025.00

BK
3/27/95
Overnight

~~SALES TAX~~ Overnight	5.00
FILING	1750.00
R. AGENT FEE	35.00
~~......~~ (4) CUS	35.00
TOTAL	$1,825.00
W. BANK	
BALANCE DUE	
REFUND	

FEE	$
DISBURSED	$
SURCHARGE	$
TAX on corporate supplies	$
SUBTOTAL	$
PREPAID	$
BALANCE DUE	$
	$

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE			
TIME			CK No.
BY	JW		

WALK-IN
Will Pick Up 3-27 11:00

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum

THANK YOU
from
Your Capital Connection

CERTIFICATE OF LIMITED PARTNERSHIP

OF

METROPOLITAN ASSOCIATES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10: 14

1. NAME OF LIMITED PARTNERSHIP:
METROPOLITAN ASSOCIATES, LTD.

2. BUSINESS ADDRESS:
6940 Lions Head Lane
Boca Raton, FL 33496

3. REGISTERED AGENT:
LEONARD LEEDS, Registered Agent
6940 Lions Head Lane
Boca Raton, FL 33496

4. REGISTERED AGENT'S SIGNATURE OF ACCEPTANCE FOR SERVICE OF PROCESS:

Leonard Leeds
LEONARD LEEDS

5. MAILING ADDRESS OF LIMITED PARTNERSHIP:
6940 Lions Head Lane
Boca Raton, FL 33496

6. NAME OF GENERAL PARTNER:
METROPOLITAN MHP, INC.
6940 Lions Head Lane
Boca Raton, FL 33496

P95000020859

The latest date upon which the Limited Partnership is to be dissolved is March 15, 2015.

Signed this 17th day of March, 1995.

METROPOLITAN MHP, INC., a
General Partner

By: Leonard Leeds
LEONARD LEEDS, President

LEEDS.LEO\LTD-PART.CRT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:14

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned constituting all of the general partners of METROPOLITAN ASSOCIATES, LTD., a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is $ 892,500.00 .

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $ 892,500.00 .

FURTHER AFFIANT SAYETH NAUGHT.

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

This 17th day of March, 1995.

METROPOLITAN MHP, INC., a
General Partner

By: Leonard Leeds
LEONARD LEEDS, President

LEEDS.LEO\MAI-AFF.CC

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
96 JAN -5 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

METROPOLITAN ASSOCIATES, LTD.

1a. DOCUMENT # **A95000000472**

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
6940 LIONS HEAD LANE	6940 LIONS HEAD LANE
BOCA RATON FL 33496	BOCA RATON FL 33496

If above addresses are not correct, or any are omitted, type in the correct information and/or enter Mailing Address in Block 2 and/or 2a.

3. Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
03/27/1995		FL

5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to Date	6. FEI Number	7. CERTIFICATE OF STATUS REQUIRED
$892,500.00		65-0576349	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 607.193, 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

1-10

9. **Name and Address of Current Registered Agent**

LEEDS, LEONARD
6940 LIONS HEAD LANE
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
METROPOLITAN MHP, INC.	6940 LIONS HEAD LANE	BOCA RATON FL 33496	P95000020859

900001685989
-01/11/96--01007--012
****576.25 ****576.25

CR2E003 (6/95)

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 complete, accurate 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 any kind in accepting this report for filing. I further certify that the information indicated 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 620, Florida Statutes.

SIGNATURE Leonard Leeds DATE 1/3/96

Typed or Printed Name of General Partner Signing Form Leonard Leeds Telephone Number 407-483-6800

0007524