1201 Hays Street
Tallahassee, FL 32301
800-342-8096

A95000000638

CSC networks
PRENTICE HALL LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 582561 11645A

AUTHORIZATION : Patricia Riggato

COST LIMIT : $ 87.50

ORDER DATE : April 20, 1995

ORDER TIME : 10:59 AM

ORDER NO. : 582561

800001461259

CUSTOMER NO: 11645A

CUSTOMER: Ms. Patti Barr
LERNER & PEARCE, P.A.

2888 East Oakland Park Blvd
Fort Lauderdale, FL 33306

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 20 PM 1:16

DOMESTIC FILING

NAME: SLK, LTD.

____ ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

4/20/95

CONTACT PERSON: Jennifer Moran

EXAMINER'S INITIALS: BJ

SLK, LTD.

CERTIFICATE OF LIMITED PARTNERSHIP

Name of Limited Partnership	SLK, LTD.
Office, Name and Address of Agent for Service of Process Pursuant to Fla.Stat., 620.105	Allan M. Lerner, Esq. Lerner & Pearce, P.A. 2888 East Oakland Pk. Blvd. Ft. Lauderdale, FL 33306
Name and Address of General Partner and Mailing Address of Limited Partnership	SLK, INC. Suite 312A 5700 Lake Worth Road Lake Worth, Florida 33463
Latest Date Limited Partnership Will Dissolve	January 1, 2020

95 APR 20 PM 1:16

P95000030302

SLK, INC.
General Partner to SLK, LTD.

BY: _____
Stephen Lerner, President

Dated: April 18, 1995

AFFIDAVIT OF GENERAL PARTNER

FILED STATE SECURITIES BUREAU 95 APR 20 PM 1:15

STATE OF NEW JERSEY)
)
COUNTY OF BERGEN)

I, STEPHEN LERNER, being duly sworn, deposes and says:

1. I am the President of SLK, INC., General Partner of SLK, LTD.

2. The capital contribution of Initial Limited Partner is $100.00.

3. The anticipated capital contributions of Limited Partners is $100.00.

FURTHER AFFIANT SAYETH NAUGHT.

SLK, INC.

By: _____
Stephen Lerner, President

SWORN TO and *SUBSCRIBED* before me this 18th day of April, 1995.

[seal]

_____
Notary Public, State of New Jersey
Notary Printed Name: Jane M. Prada
My Commission Expires: 7/9/96
My Commission Number: _____

Personally Known ✓ Produced Identification _____

Type of Identification _____

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 620.105, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT SLK, LTD.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF Fort Lauderdale, STATE OF Florida,

HAS NAMED Allan M. Lerner, Esq. LOCATED AT 2888 East Oakland Park Boulevard, CITY OF Fort Lauderdale, STATE OF Florida,

AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

FILED
95 APR 20 PM 1:16
SECRETARY OF STATE
DIVISION OF CORPORATIONS

SIGNATURE: _____
Stepheh Lerner

President, SLK, INC.
General Partner
TITLE: to SLK, LTD.

DATE: April 18, 1995

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO 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.

SIGNATURE: _____
ALLAN M. LERNER, ESQ.
Registered Agent

DATE: April 19, 1995

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

1. Name of Limited Partnership

SLK, LTD.

1a. DOCUMENT # A95000000638

000001678808

DO NOT WRITE IN THIS SPACE

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
5700 LAKE WORTH ROAD, SUITE 312-A
LAKE WORTH FL 33463

Principal Office Address
5700 LAKE WORTH ROAD, SUITE 312-A
LAKE WORTH FL 33463

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in item 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
04/20/1995	N/A	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
$100.00	$100.00	Applied for	X 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.

9. Name and Address of Current Registered Agent

LERNER, ALLAN M ESQ.
C/O LERNER & PEARCE, P.A.
2888 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33306

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
SLK, INC.	5700 LAKE WORTH ROAD,	LAKE WORTH FL 33463 up 12/29	P95000030302

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 Stephen Lerner DATE December 28, 1995

Stephen Lerner, President SLK, Inc.
Typed or Printed Name of General Partner Signing Form

(407)439-6636
Telephone Number

0009945

120 Hays Street
Tallahassee, FL 32301
904-222-8171
904-222-8091 FAX

800-342-8086

CSC networks
PRENTICE HALL
LEGAL & FINANCIAL SERVICES

RECEIVED
95 DEC 29 AM 11:17
SECRETARY OF CORPORATION

ACCOUNT NO. : 072100000032

REFERENCE : 787360 11645A

AUTHORIZATION : Patricia Pyatt

COST LIMIT : $ 191.25

ORDER DATE : December 29, 1995

ORDER TIME : 10:16 AM

ORDER NO. : 787360

A95000000638

CUSTOMER NO: 11645A

600001673886

CUSTOMER: Ms. Patti Barr
Lerner & Pearce, P.a.
2800 East Oakland Park Blvd.

Fort Lauderdale, FL 33306

DOMESTIC FILINGS

NAME: SLK, LTD.

FILED
95 DEC 29 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

XX 1996 ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS _____