

1201 HAYS STREET  
TALLAHASSEE, FL 32301  
904-222-0171  
904-222-0171

000-342-8086



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PROFESSIONAL  
LEGAL & FINANCIAL SERVICES

**A9500000067**

FILED  
SECRETARY OF STATE  
OFFICE OF CORPORATIONS  
APR 27 PM 1:34

ACCOUNT NO. : 072100000032

REFERENCE : 586242 113642A

AUTHORIZATION :

COST LIMIT : 9 PPD

7000001473267  
05/03/95-01077-020  
\*\*\*1785.00\*\*\*1785.00

ORDER DATE : April 27, 1995

ORDER TIME : 9:53 AM

ORDER NO. : 586242

CUSTOMER NO: 113642A

CUSTOMER: Bruce R. Abernethy, Jr., Esq  
BRUCE R. ABERNETHY, JR., P.A.

Suite 6  
900 Virginia Avenue  
Ft. Pierce, FL 34982

4/27/95  
3/1  
C. TAX \_\_\_\_\_  
FILING \_\_\_\_\_ 17.50  
P. AGENT FEE \_\_\_\_\_ 3.5  
COPY \_\_\_\_\_  
TOTAL \_\_\_\_\_ 17.65  
N. BANK \_\_\_\_\_  
BALANCE DUE \_\_\_\_\_  
REFUND \_\_\_\_\_

DOMESTIC FILING

NAME: DIGIACOMO FAMILY PARTNERS,  
LTD.

ARTICLES OF INCORPORATION  
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jennifer Moran

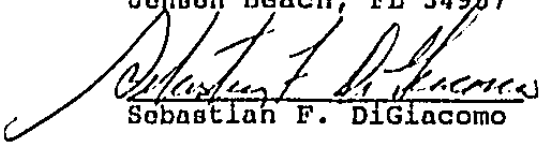
EXAMINER'S INITIALS:

4/27/95  
B/C

CERTIFICATE OF LIMITED PARTNERSHIP

OF

DIGIACOMO FAMILY PARTNERS, LTD.

1. Name: DiGiacomo Family Partners, Ltd.
2. Address: 8750 S. Ocean Drive  
Jensen Beach, FL 34957
3. Registered Agent: Sebastian F. DiGiacomo
4. Address: 8750 S. Ocean Drive  
Jensen Beach, FL 34957
5. Registered Agent's  
Acceptance:   
Sebastian F. DiGiacomo
6. Mailing Address  
of Limited Partnership: 8750 S. Ocean Drive  
Jensen Beach, FL 34957
7. Latest date upon which  
the Limited Partnership  
is to be dissolved is: December 31, 2045

- | 8. <u>NAME OF GENERAL PARTNERS</u> | <u>BUSINESS ADDRESS</u>                       |
|------------------------------------|---|
| Sebastian F. DiGiacomo             | 8750 S. Ocean Drive<br>Jensen Beach, FL 34957 |

DATED this 25 day of April, 1995.

DIGIACOMO FAMILY PARTNERS, LTD.

By: 

Sebastian F. DiGiacomo  
General Partner

FILED STATE  
SECRETARY OF  
95 APR 27 PM 1:34

STATE OF New York  
COUNTY OF Westchester

Before me personally appeared, SEBASTIAN F. DIGIACOMO, who is personally known to me or who has produced a valid Drivers License as identification and who did take an oath, and who executed the foregoing instrument, and he acknowledged before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this 25 day of April, 1995.

Maria Lucia DeCova  
NOTARY PUBLIC

Maria Lucia DeCova  
PRINTED NAME OF NOTARY

MY COMMISSION EXPIRES:

MARIA LUCIA DeCova  
Notary Public, State of New York  
No. 30-4788882  
Qualified in Nassau County  
Commission Expires April 30, 1996

FILED STATE  
SECRETARY OF DEPOSITIONS  
DIVISION OF  
95 APR 27 PM 1:34

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

Before me, the undersigned, being the sole General Partner of DIGIACOMO FAMILY PARTNERS, LTD., a Florida Limited Partnership, does certify as follows:

1. The amount of capital contributions to date of the General and Limited Limited Partners is \$-0-.

2. The total amount contributed and anticipated to be contributed by the General and Limited Partners at this time totals \$675,000.00.

Executed this 25 day of April, 1995.

FURTHER AFFIANT SAYETH NOT.

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.

DIGIACOMO FAMILY PARTNERS, LTD.

By: Sebastian F. DiGiacomo

Sebastian F. DiGiacomo  
General Partner

STATE OF New York  
COUNTY OF Queens

Before me personally appeared, SEBASTIAN F. DIGIACOMO, who is personally known to me or who has produced a valid Drivers License as identification and who did take an oath, and who executed the foregoing instrument, and he acknowledged before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this 25 day of April, 1995.

Maria Lucia DeCova  
NOTARY PUBLIC

Maria Lucia de Cova  
PRINTED NAME OF NOTARY

MY COMMISSION EXPIRES:

MARIA LUCIA DeCOVA  
Notary Public, State of New York  
No. 30-4788882  
Qualified in Nassau County  
Commission Expires April 30, 1996

# A 95000000671

Frank Osanitch  
400 So. Oyster Bay Rd.  
Hicksville, NY 11801

(City, State, Zip)

(Phone #)

200001685522  
-12/19/95--01075--001  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

OFFICE USE ONLY

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED  
95 DEC 19 PM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS		AMENDMENTS	
<input type="checkbox"/> Profit		<input type="checkbox"/> Amendment	
<input type="checkbox"/> NonProfit		<input type="checkbox"/> Resignation of R.A., Officer/Director	
<input type="checkbox"/> Limited Liability		<input type="checkbox"/> Change of Registered Agent	
<input type="checkbox"/> Domestication		<input type="checkbox"/> Dissolution/Withdrawal	
<input type="checkbox"/> Other		<input type="checkbox"/> Merger	

OTHER FILINGS		REGISTRATION/ QUALIFICATION	
<input type="checkbox"/> Annual Report		<input type="checkbox"/> Foreign	
<input type="checkbox"/> Fictitious Name		<input type="checkbox"/> Limited Partnership	
<input type="checkbox"/> Name Reservation		<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Acknowledgment		<input type="checkbox"/> Trademark	
<input type="checkbox"/> W.B. Verifier		<input type="checkbox"/> Other	

Examiner's Initials

A 95000000671

**CERTIFICATE OF CANCELLATION  
FOR**

DiGiacomo Family Partners, Ltd.  
(insert name currently on file with Florida Dept. of State)

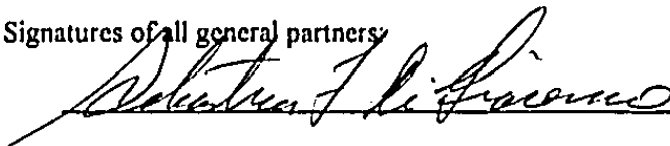
Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on April 27, 1995, hereby submits this certificate of cancellation.

**FIRST:** Reason for cancellation: (State why partnership is submitting cancellation)

Partnership dissolved on December 14, 1995

**SECOND:** This certificate of cancellation shall be effective at the time of its filing with the Florida Department of State.

**THIRD:** Signatures of all general partners:

  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
95 OCT 19 PM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA