

120 HAYS STREET
TALLAHASSEE, FL 32301
904-224-1111
904-224-1111 FAX

800-142-8086

A9 500000752



ACCOUNT NO. : 072100000032
REFERENCE : 598452 4656B
AUTHORIZATION :
COST LIMIT : \$ 140.00

RECEIVED
SECRETARY OF CORPORATIONS
FILED STATE
55 MAY 12 PM 3:08
DIVISION OF CORPORATION
55 MAY 12 PM 3:27
DIVISION OF CORPORATION

ORDER DATE : May 12, 1995
ORDER TIME : 2:46 PM
ORDER NO. : 598452
CUSTOMER NO: 4656B
CUSTOMER: Kristy Hair, Legal Assistant
GREENBERG TRAUIG HOFFMAN
LIPOFF ROSEN & QUENTEL, P. A.
15th Floor
515 East Las Olas Boulevard
Fort Lauderdale, FL 33301

BK
5/12/95

200001487562

DOMESTIC FILING

NAME: KENDALL 157 SUPERSTORE, LTD.

ARTICLES OF INCORPORATION
XXXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS:

Buck,
This needs
today's file
date, I will
send the original
to your attention
on Monday.

Thanks
Karen

CERTIFICATE OF LIMITED PARTNERSHIP
OF
KENDALL 157 SUPERSTORE, LTD.

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 MAY 12 PM 2:56

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), and Section 620.108 of the Florida Statutes, the undersigned, being the sole General Partner of KENDALL 157 SUPERSTORE, LTD., heroby duly executes and files with the Florida Secretary of State this Certificate of Limited Partnership.

1. The name of the limited partnership is KENDALL 157 SUPERSTORE, LTD.

2. The business address and the mailing address of the limited partnership is c/o Suchman Retail Group, 1550 Madruga Avenue, Suite 230, Coral Gables, Florida 33146.

3. The name of the registered agent for service of process required by Section 620.105 of the Florida Statutes is:

Lawrence E. Suchman

4. The Florida street address for the registered agent is:

c/o Suchman Retail Group
1550 Madruga Avenue
Suite 230
Coral Gables, Florida 33146

5. Acceptance of Appointment of Registered Agent:

Having been named the statutory registered agent of KENDALL 157 SUPERSTORE, LTD., at the place designated in this Certificate of Limited Partnership of KENDALL 157 SUPERSTORE, LTD., I hereby accept such designation and confirm that I am familiar with and agree to accept the obligations imposed by Chapter 620.192 of the Florida Statutes and I agree to comply with the provisions of Florida Law relative to keeping the registered office open.


Lawrence E. Suchman

Dated: May 12, 1995

6. The name and business address of the general partner is as follows:

Kendall 157 Superstore, Inc.
c/o Suchman Retail Group
1550 Madruga Avenue
Suite 230
Coral Gables, Florida 33146

P9500037386

FILED
SECRETARY OF CORPORATIONS
DIVISION
95 MAY 12 PM 2:56

7. The latest date on which the limited partnership is to dissolve is December 31, 2044.

IN WITNESS WHEREOF, the sole General Partner has executed foregoing Certificate of Limited Partnership on this 12th day of May, 1995 in accordance with Section 620.114 of the Florida Statutes.

KENDALL 157 SUPERSTORE, INC., a
Florida corporation, General
Partner



Lawrence E. Suchman, President

STATE OF Florida
COUNTY OF Dade

SS:

The foregoing instrument was acknowledged before me this 12th day of May, 1995 by Lawrence E. Suchman in his capacity as President of Kendall 157 Superstore, Inc. He personally appeared before me, is personally known to me or produced _____ as identification, and [did] [did not] take an oath.

[NOTARIAL SEAL]



Notary: Leslie L. Kennedy
Print Name: Leslie L. Kennedy
Notary Public, State of Florida
My commission expires: 12/11/97

AFFIDAVIT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 12 PM 2:56

BEFORE ME, the undersigned, constituting the sole general partner of KENDALL 157 SUPERSTORE, LTD., a Florida limited partnership, certifies as follows:

1. The initial Limited Partners of KENDALL 157 SUPERSTORE, LTD. have contributed \$100 in cash to the Partnership.

2. The initial Limited Partners anticipate making additional capital contributions to the Partnership, in an amount yet to be determined, within the next twelve (12) months.

FURTHER AFFIANT SAYETH NAUGHT.

Under 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.

KENDALL 157 SUPERSTORE, INC., a
Florida corporation, General
Partner



Lawrence E. Suchman, President

5/12/95

STATE OF Florida)
)
COUNTY OF Dade) SS:

The foregoing instrument was acknowledged before me this 12th day of May, 1995 by Lawrence E. Suchman in his capacity as President of Kendall 157 Superstore, Inc. He personally appeared before me, is personally known to me or produced _____ as identification, and [did] [did not] take an oath.

[NOTARIAL SEAL]



Notary: Leslie L. Kennedy
Print Name: Leslie L. Kennedy
Notary Public, State of Florida
My commission expires: 12/11/97

FILED
STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
MAY 12 PM 2:55

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



REGISTRATION STATE
PARTNERSHIP
ANNUAL REPORT
1996

FILED
SECRETARY OF STATE
95 DEC 29 AM 10:15

1. Name of Partnership
KENDALL 157 SUPERSTORE, LTD.

1a. DOCUMENT #
A9500000752

Mailing Address
**C/O SUCHMAN RETAIL GROUP
1550 MADRUGA AVE., SUITE 230
CORAL GABLES FL 33146**

Physical Office Address
**C/O SUCHMAN RETAIL GROUP
1550 MADRUGA AVE., SUITE 230
CORAL GABLES FL 33146**

2. New Mailing Address (if Applicable)
Date: Apt # etc

2a. New Physical Office Address (if Applicable)
Date: Apt # etc

3. Date Formed or Registered in this Jurisdiction
FLORIDA 05/12/1995

3a. Date of Last Report

4. State of Incorporation
FL

5a. Capital Contributions as Shown on Record
\$100.00

5b. Amount of Capital Contributions to FLORIDA to date
\$100.00

6. FEI Number
65-0592709

7. CERTIFICATE OF STATUS REQUIRED
Applied Fee: **\$6.75** Additional Fee required for a Certificate of Status
Not Applicable

B. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5a 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 \$101.25 (\$42.50 + \$138.75) AND NO MORE THAN \$570.25 (\$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
**SUCHMAN, LAWRENCE E
C/O SUCHMAN RETAIL GROUP
1550 MADRUGA AVE., SUITE 230
CORAL GABLES FL 33146**

10. If changed, new Registered Agent's 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 620.105(1) 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 sections 620.102, Florida Statutes.

DATE: _____

SIGNATURE (Registered Agent Accepting Appointment)
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. Registrar's Document Number |
|-------------------------------------|---|------------------------------|----------------------------------|
| KENDALL 157 SUPERSTORE, INC. | C/O 1550 MADRUGA AVE. | CORAL GABLES FL 33146 | P95000037386 |

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

12. I represent and warrant that the information required with this form is true and correct and that I am authorized to execute this form on behalf of the partnership. I warrant that the information indicated on this report is true and correct and that the partnership is organized in the same legal jurisdiction as indicated on this report. I warrant that the partnership is a general partnership of the limited partnership, receiver or trustee as reported to the Secretary of State in the last report filed by the partnership.

SIGNATURE DATE **12/20/95**

Lawrence E. Suchman, President Telephone Number **305-667-6461**

CR2E003 (6-95)