

A95000000996

CSC networks

PROFESSIONAL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 629676 6386A

AUTHORIZATION :

COST LIMIT : 9 PPD

FILED
JUN 30 PM 3 16
TALLAHASSEE, FLORIDA

ORDER DATE : June 30, 1995

ORDER TIME : 10:03 AM

ORDER NO. : 629676

CUSTOMER NO: 6386A

CUSTOMER: Justin Wilson, Legal Assistant
ADORNO & ZEDER, P.A.

Suite 1600
2601 South Bayshore Drive
Miami, FL 33133

600001532766
-07/07/95--01005--001
***1037.50 ***1037.50

File
2nd

DOMESTIC FILING

NAME: 65-45 MIRACLE MILE,

G. TAX _____
FILING _____ 17.50
R. AGENT FEE _____ 35
C. COPY _____ 105.00
TOTAL _____ 1890.00
N. BANK _____
BALANCE DUE _____
OFFIND _____

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX 2 NEEDED CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea C. Mabry

EXAMINER'S INITIALS:

FF - \$1,750.00
RA - 35.00
2CC - 105.00

600001532766
-07/07/95--01005--002
*****52.50 *****52.50

6/30/95a

A95000000996

CERTIFICATE OF LIMITED PARTNERSHIP
OF
65-45 MIRACLE MILE, LTD.

FILED
1995 JUN 30 PM 3:16
TALLAHASSEE, FLORIDA

The undersigned, pursuant to the provisions of Section 620.108 of the Florida Statutes, do hereby execute and file this Certificate of Limited Partnership.

1. NAMING.

The name of the Limited Partnership is:

65-45 MIRACLE MILE, LTD.

2. ADDRESS OF LIMITED PARTNERSHIP.

The address of the office of the Limited Partnership
is:

65-45 Miracle Mile, Ltd.
c/o Mr. Robert C. Fielding
Park Regent Building
184 Bradley Place
Palm Beach, Florida 33480

3. REGISTERED AGENT.

The name and address of the Registered Agent for the
Limited Partnership is:

A Z Registered Agent Corporation
2601 South Bayshore Drive
Suite 1600
Miami, Florida 33133

4. GENERAL PARTNER.

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

65-45 Miracle Mile, Inc.
Park Regent Building
184 Bradley Place
Palm Beach, Florida 33480

5. MAILING ADDRESS.

The mailing address for the Limited Partnership is
as follows:

65-45 Miracle Mile, Ltd.
c/o Mr. Robert C. Fielding
Park Regent Building
184 Bradley Place
Palm Beach, Florida 33480

6. DISSOLUTION DATE.

The latest date upon which the Limited Partnership
is to dissolve is June 1, 2045.

7. DATE OF FORMATION OF LIMITED PARTNERSHIP.

The Limited Partnership shall be deemed formed on
June 1, 1995, or at such later date when the Certificate of Limited
Partnership is filed.

IN WITNESS WHEREOF, the General Partner has caused this
Certificate of Limited Partnership to be executed on this 25 day
of May, 1995.

65-45 MIRACLE MILE, INC.,
General Partner

By: Robert C. Fielding
Robert C. Fielding,
President

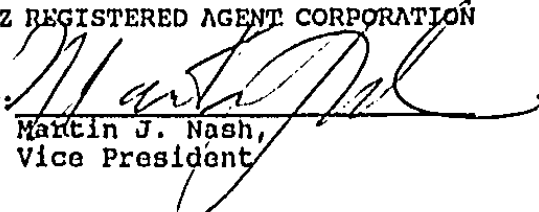
FILED
1995 JUN 30 PM 3:16
TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT

Pursuant to Sections 620.105 and 620.192 of the Florida Statutes, the undersigned accepts appointment as registered agent for 65-45 MIRACLE MILE, LTD., a Florida limited partnership, and accepts all obligations imposed on it as such under Florida law.

Executed this 21 day of May, 1995.

A Z REGISTERED AGENT CORPORATION

By: 

Martin J. Nash,
Vice President

FILED
1995 JUN 30 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned General partner of 65-45 MIRACLE MILE, LTD. (the "Limited Partnership"), being duly sworn, deposes and says:

The total original capital contributions of the limited partners of the Limited partnership is \$ 500,000 and there are no anticipated future capital contributions of the limited partners.

65-45 MIRACLE MILE, INC.,
General Partner

By:

Robert C. Fielding
Robert C. Fielding
President

STATE OF New York)
COUNTY OF New York) SS:

The foregoing instrument was acknowledged before me this 25 day of May, 1995 by ROBERT C. FIELDING, as President of 65-45 MIRACLE MILE, INC., a Florida corporation, on behalf of the Corporation. He is personally known to me ~~or~~ has produced as identification and did take an oath.

Georgia Bayaz
Notary Public

My commission expires: 2/28/97

GEORGIA BAYAZES
Notary Public, State of New York
No. 5022585
Qualified in Kings County
Commission Expires March 29, 1997

ANCERT.LTD
052395/2/dl

FILE ON OR BEFORE APRIL 5, 1996 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 FEB 23 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
65-45 MIRACLE MILE, LTD.

1n. DOCUMENT #
A95000000996

9L-AR
Cus

Mailing Address

C/O MR. ROBERT C. FIELDING
184 BRADLEY PLACE, PARK REGENT BLDG
PALM BEACH FL 33400

Principal Office Address

C/O MR. ROBERT C. FIELDING
184 BRADLEY PLACE, PARK REGENT BLDG
PALM BEACH FL 33400

CM

If above addresses are identical, check box and file through the usual information and enter correct address in Block 3 and/or 2a.

3. Date of Last Report
FLORIDA
06/30/1995

3n. Date of Last Report

4. State or County of Formation
FL

2. New Mailing Address, if Applicable

City, State & Zip

City, State & Zip

City, State & Zip

City, State & Zip

5a. Capital Contributions as Shown
on Record
\$500,000.00

5b. Amount of Capital Contributions as
FLORIDA to date

6. Filing Fee
13-6087014

Applied Fee
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 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2. Supplemental Fee: \$130.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE \$52.50 IF 5b IS \$100,000 OR LESS; \$130.75 IF 5b IS \$100,001 TO \$500,000; \$261.50 IF 5b IS \$500,001 TO \$1,000,000; \$392.25 IF 5b IS \$1,000,001 TO \$1,500,000; \$523.00 IF 5b IS \$1,500,001 TO \$2,000,000; \$653.75 IF 5b IS \$2,000,001 TO \$2,500,000; \$784.50 IF 5b IS \$2,500,001 TO \$3,000,000; \$915.25 IF 5b IS \$3,000,001 TO \$3,500,000; \$1,046.00 IF 5b IS \$3,500,001 TO \$4,000,000; \$1,176.75 IF 5b IS \$4,000,001 TO \$4,500,000; \$1,307.50 IF 5b IS \$4,500,001 TO \$5,000,000; \$1,438.25 IF 5b IS \$5,000,001 TO \$5,500,000; \$1,569.00 IF 5b IS \$5,500,001 TO \$6,000,000; \$1,699.75 IF 5b IS \$6,000,001 TO \$6,500,000; \$1,830.50 IF 5b IS \$6,500,001 TO \$7,000,000; \$1,961.25 IF 5b IS \$7,000,001 TO \$7,500,000; \$2,092.00 IF 5b IS \$7,500,001 TO \$8,000,000; \$2,222.75 IF 5b IS \$8,000,001 TO \$8,500,000; \$2,353.50 IF 5b IS \$8,500,001 TO \$9,000,000; \$2,484.25 IF 5b IS \$9,000,001 TO \$9,500,000; \$2,615.00 IF 5b IS \$9,500,001 TO \$10,000,000.
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.
MAY BE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

1. Z REGISTERED AGENT CORPORATION
2601 SOUTH BAYSHORE DR.
STE. 1600
MIAMI FL 33133

10. If changed, new Registered Agent's Office

Name

Street Address (P.O. Box Number is Not Acceptable)

City, State & Zip

City

FL Zip Code

10a. Pursuant to the provisions of sections 620.105(1) and 620.107, 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 620.107, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Give full street address, not P.O. Box, for each partner)

11b. City, State & Zip Code

11c. Registered
(Document Number)

65-45 MIRACLE MILE, INC.

184 BRADLEY PLACE, PA

PALM BEACH FL 33480

P95000051245

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

12. I, the undersigned, certify that the information supplied on this form is true and correct to the best of my knowledge and belief, and that I am a general partner in the limited partnership named herein. I understand that the information supplied on this form is subject to the audit of the Department of State, and that I am liable for the accuracy of the information supplied. I understand that the information supplied on this form is subject to the audit of the Department of State, and that I am liable for the accuracy of the information supplied. I understand that the information supplied on this form is subject to the audit of the Department of State, and that I am liable for the accuracy of the information supplied.

SIGNATURE
By: **Robert C. Fielding, Pres.**

Typed or Printed Name of General Partner Signing Form

Telephone Number

DATE **2/16/96**

CR2EC03 (11.95)