A95000001097

RAISMAN & GERARDI, ESQS., P.C.
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MYRON S. RAISMAN ANGELA GERARDI

July 14, 1995

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

100001540511
-07/18/95--01103--001
****108.50 ****108.50

100001540511
-07/18/95--01103--002
****101.50 ****101.50

Re: Gullane, Ltd. and Gullane II, Ltd.

Dear Sirs:

Enclosed herewith please find an original Certificate of Limited Partnership for Gullane, Ltd. and Gullane II, Ltd. together with an Affidavit of Capital Contributions for each. A check in the sum of $108.50 is enclosed representing the filing fee and designation of registered agent fee for Gullane, Ltd. and a check in the sum of $101.50 representing the filing fee and designation of registered agent fee for Gullane II, Ltd.

Should any additional information be required, please contact the undersigned.

Very truly yours,

RAISMAN & GERARDI, ESQS., P.C.

Myron S. Raisman

By: Myron S. Raisman

FILED
95 JUL 19 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MSR:ysm
Enclosures

7/19/95 Q

Prepaid $21.00

Certificate of Limited Partnership
GULLANE, LTD. A95000001097

1. The name of the limited partnership is GULLANE, LTD.

2. The business address of the of the Limited Partnership is to 8611 Gullane Court, Palm Beach, Florida, 33412.

3. August J. Cassella is the registered agent of the Partnership upon whom process against the Limited Partnership may be served.

4. The address of the Registered Agent 8611 Gullane Court, Palm Beach, Florida, 33412.

5. The Registered Agent has hereby signed this instrument and thereby accepts the designation of Registered Agent for the Service of Process. _____.

6. The mailing address of the Limited Partnership is the same as item 2 above.

7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2020.

8. The name and address of the General Partner is as follows:

Name	Address
August J. Cassella	8611 Gullane Court, Palm Beach, FL 33412

IN WITNESS WHEREOF, the undersigned, consisting of all of the general partners of the Partnership have executed this Certificate of Partnership this 22 day of May, 1995, and affirm the statements contained herein as true under penalties of perjury.

_____
August J. Cassella
General Partner

FILED
95 JUL 10 AM 10 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the managing general partner and the general partner of GULLANE, LTD., a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the general partners is None.

The total amount contributed and anticipated by the limited partners at this time totals $3,000.

This 22 day of May, 1995

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury we declare that we have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

August J. Cassella
General Partner

FILED
95 JN 10 AM 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE ON OR BEFORE DECEMBER 31, 1996 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 17 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. DOCUMENT # A95000001097

Name of Limited Partnership

LANE, LTD.

DO NOT WRITE IN THIS SPACE

Mailing Address
GUILLAME CT.
BEACH FL 33412

Principal Office Address
6811 GUILLAME CT.
PALM BEACH FL 33412

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

If addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
07/18/1995		FL

Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date	6. FEI Number	7. CERTIFICATE OF STATUS REQUIRED
$3,000.00			X Applied For ☐ Not Applicable

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.)
AMOUNT DUE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($437.50 + $138.75)
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
CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

OR 1-17

9. Name and Address of Current Registered Agent

ASSELLA, AUGUST J
11 GUILLAME COURT
PALM BEACH FL 33412

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. # etc.

City FL Zip Code

1. Pursuant to the provisions of sections 620.1051 and 620.182, 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

GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

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
ASSELLA, AUGUST J	6811 GUILLAME CT.	PALM BEACH FL 33412	

400001692674
-01/19/96--01011--011
*****52.50 *****52.50

400001692674
-01/19/96--01011--012
*****138.75 *****138.75

CR2E003 (6/95)

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

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.

DATE 12-21-95

SIGNATURE August Assella Telephone Number

Typed or Printed Name of General Partner Signing Form AUGUST ASSELLA