

1201 HAYS STREET
TALLAHASSEE, FL 32301

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A95000001539



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PRESTICE HALL
LEGAL & FINANCIAL SERVICES

FILED STATE
SECRETARY OF CORPORATIONS
95 OCT 12 PM 4:00

ACCOUNT NO. : 072100000032

REFERENCE : 707223 81686A

AUTHORIZATION :

Patricia P.

COST LIMIT : \$ 140.00

ORDER DATE : October 12, 1995

000001608980

ORDER TIME : 9:58 AM

ORDER NO. : 707223

CUSTOMER NO: 81686A

CUSTOMER: Mercedes Padin, Esq
KEITH MACK LEWIS COHEN &
LUMPKIN, P.A.
20th Floor
200 South Biscayne Boulevard
Miami, FL 33131

RECEIVED
95 OCT 12 PM 4:23
OFFICE OF THE SECRETARY OF CORPORATIONS

DOMESTIC FILING

NAME: 4305 NW 97TH LTD.

ARTICLES OF INCORPORATION

X CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

X CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Gail L. Shelby

EXAMINER'S INITIALS:

10/12/95

10/12/95

mp

**CERTIFICATE OF LIMITED PARTNERSHIP OF
4305 NW 97th LTD.
A Florida Limited Partnership**

The undersigned General Partner, desiring to form a limited partnership pursuant to Florida Revised Uniform Limited Partnership Act as set forth in Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is 4305 NW 97th LTD.
2. The address of the office of the Partnership is:

7134 Abbott Avenue
Miami Beach, FL 33141
3. The name of the Registered Agent for service of process on the Partnership is:

Jose Salazar
4. The address of the Registered Agent for service of process on the Partnership is:

7134 Abbott Avenue
Miami Beach, FL 33141
5. The name and address of the general partner are as follows:

4305 NW 97th Inc.
7134 Abbott Avenue
Miami Beach, FL 33141
6. The mailing address of the Partnership is:

7134 Abbott Avenue
Miami Beach, FL 33141
7. The latest date upon which the Partnership shall dissolve is December 31, 2025.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

FILED
SECRETARY OF CORPORATIONS
DIVISION
95 OCT 12 PM 4:00

P95000078448

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by
4305 NW 97th INC., the General Partner of 4305 NW 97th LTD. this 7th
October, 1995.

Witnesses:

Theresa Padua
Christy Confined

4305 NW 97th Inc.,
a Florida corporation

By: [Signature] (SEAL)
Jose Salazar, President

FILED STATIONS
SECRETARY OF CORPORATIONS
DIVISION 12 PM 4:00
950912

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for 4305 NW 97th LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned, on behalf of the Partnership, hereby agrees to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

By: [Signature]
Jose Salazar

Date: 10-7-95

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

FILED STATE'S
SECRETARY OF CORPORATIONS
95 OCT 12 PM 4:00
DIVISION OF CORPORATIONS

STATE OF FLORIDA)
) ss:
COUNTY OF DADE)

BEFORE ME, the undersigned, personally appeared Jose Salazar, who, after being duly sworn, certified as follows:

1. He is the President of 4305 NW 97th INC., a Florida corporation (the "Corporation");
2. The Corporation is the sole general partner of 4305 NW 97th LTD., a Florida Limited Partnership (the "Partnership");
3. The amount of capital contributions to the Partnership made by the limited partners is \$100.00;
4. No additional capital contributions are anticipated to be made by the limited partners.

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.

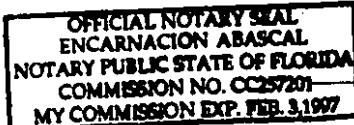
4305 NW 97th INC.,
a Florida corporation

Date: 10-7, 1995

By: [Signature] (SEAL)
Jose Salazar, President

STATE OF FLORIDA)
) ss:
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 7th day of October, 1995, by Jose Salazar as President of 4305 NW 97th INC., a Florida corporation (which corporation is known by me to be the sole General Partner of 4305 NW 97th LTD., a Florida limited partnership), on behalf of the corporation. He is (check one) ☒ personally known to me or ☐ has produced a _____ as identification.



[Signature]
(Signature of Person Taking Acknowledgment)

(Name of Acknowledger Typed, Printed or Stamped)

(Title or Rank)

(Serial Number, if any)

Notary Public, State of Florida

My Commission Expires:

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 JAN -2 PM 1:17

FILED

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
4305 NW 97th LTD.

1a. DOCUMENT #
A 95000061539

Mailing Address
7134 Abbott Ave
Miami Beach FL 33141

Principal Office Address
4305 NW 97th Ave
Miami, FL 33178

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

3. Date Formed or Registered to Do Business in FLORIDA
10/12/95

3a. Date of Last Report
N/A

4. State or Country of Formation
Dade / FL

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

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

6. FEI Number
X Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
X

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
JOSE SALAZAR
7134 Abbott Ave
Miami Beach FL 33141

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc
City
Zip Code
FL

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, submit 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
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

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
4305 NW 97th	7134 Abbott Ave	Miami Beach FL 33141	P950000678446

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)(h), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(h) 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 _____ DATE 12-28-95
Typed or Printed Name of General Partner Signing Form JOSE SALAZAR, PRES. Telephone Number 305-866-3131

CR2E003 (6/95)