A95000002020

CSC networks
PRENTICE HALL LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 780874 81883A

AUTHORIZATION :

COST LIMIT : $

200001670622
-12/26/95--01054--001
***1837.50 ***1837.50

ORDER DATE : December 22, 1995

ORDER TIME : 11:58 AM

ORDER NO. : 780874

CUSTOMER NO: 81883A

CUSTOMER: Sandy Jeffery, Legal Asst
SCHROEDER & LARCHE, P.A.

Suite 319-a, One Boca Place
2255 Glades Road
Boca Raton, FL 33431

FILED
95 DEC 22 PM 3:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOMESTIC FILING

NAME: THE KLATT FAMILY LIMITED PARTNERSHIP #1

RECEIVED
95 DEC 22 PM 2:19
DIVISION OF CORPORATION

_____ 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:

FF - $ 1.750.00
RA - $ 35.00
CC $ 52.50

12/22/95 aw

FILED
95 DEC 22 PM 3:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

THE KLATT FAMILY LIMITED PARTNERSHIP #1

CERTIFICATE OF LIMITED PARTNERSHIP

A95000002020

The undersigned, on behalf of the sole General Partner of THE KLATT FAMILY LIMITED PARTNERSHIP #1, a Florida Limited Partnership (the "Partnership"), files its Certificate of Limited Partnership as follows:

1. Partnership Name. The name of the Partnership is THE KLATT FAMILY LIMITED PARTNERSHIP #1.

2. Registered Office. The address of the Registered Office of the Partnership is One Boca Place, Suite 319 Atrium, 2255 Glades Road, Boca Raton, Florida 33431.

3. Registered Agent. The name and address of the Registered Agent for service of process on the Partnership is Michael A. Schroeder, Esq., Schroeder and Larche, P.A., One Boca Place, Suite 319 Atrium, 2255 Glades Road, Boca Raton, Florida 33431.

4. General Partner. The name and business address of the sole General Partner is KLATT, INC., a Florida corporation, 4269 Hypoluxo Road, Lantana, Florida 33462-3401.

5. Mailing Address. The mailing address of the Partnership is Post Office Box 1477, Boynton Beach, Florida 33425.

6. Dissolution. The latest date upon which the Partnership is to dissolve is December 31, 2025, unless the Partners agree to extend the term of the Partnership.

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

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership on behalf of KLATT, INC., as of this 21 day of December, 1995.

Witnesses:

(1) Michael A. Schroeder
MICHAEL A. SCHROEDER
Print, Type or Stamp Name of Witness

General Partner:

KLATT, INC.,
a Florida Corporation

By: Violet Klatt
VIOLET KLATT, President

(Corporate Seal)

(2) W. Lawrence Larche

W. LAWRENCE LARCHE
Print, Type or Stamp Name of Witness

FILED
95 DEC 22 PM 3:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF FLORIDA)
: SS.:
COUNTY OF PALM BEACH)

The foregoing Certificate of Limited Partnership was acknowledged before me this 21 day of December, 1995, by VIOLET KLATT, as President of KLATT, INC., a Florida corporation, on behalf of the corporation. She is personally known to me.

William Lawrence Larche

WILLIAM LAWRENCE LARCHE
Print, Type or Stamp
Commissioned Name of Notary
Public - State of Florida

My Commission Expires:

My Commission Number:

My Notary Seal:

NOTARY PUBLIC STATE OF FLORIDA
OFFICIAL NOTARY SEAL
WILLIAM LAWRENCE LARCHE
COMMISSION NUMBER
CC227666
MY COMMISSION EXP.
OCT. 22,1996

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for the Partnership in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of Registered Agent, including, but not limited to, Section 620.192, Florida Statutes, as of this 21st of December, 1995.

REGISTERED AGENT:

MICHAEL A. SCHROEDER

(S:\7\CLIENTS\KLATT\CERTIFIC.PLP 865-16)

THE KLATT FAMILY LIMITED PARTNERSHIP #1

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA)
:SS.:
COUNTY OF PALM BEACH)

FILED
95 DEC 22 PM 2:55

Before me, the undersigned authority, personally appeared VIOLET KLATT, as President of KLATT, INC., a Florida corporation, the sole General Partner of THE KLATT FAMILY LIMITED PARTNERSHIP #1, a Florida Limited Partnership (the "Partnership"), who, on behalf of the corporation, after being duly sworn, deposes and says as follows:

1. Capital Contributions to Date. The amount of capital contributions to date to the Partnership by or on behalf of the Limited Partners is Two Million Forty-Five Thousand Three Hundred Dollars ($2,045,300.00).

2. Anticipated Additional Contributions. The amount contributed and anticipated to be contributed by and on behalf of the Limited Partners at this time totals Fifty Million Dollars ($50,000,000.00).

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.

GENERAL PARTNER:

KLATT, INC., a Florida corporation

By: Violet Klatt
VIOLET KLATT, President

(Corporate Seal)

Sworn to and subscribed before me on December 21, 1995.

NOTARY PUBLIC STATE OF FLORIDA
OFFICIAL NOTARY SEAL
WILLIAM LAWRENCE LARCHE
COMMISSION NUMBER
CC227666
MY COMMISSION EXP.
OCT. 22,1996

William Lawrence Larche

WILLIAM LAWRENCE LARCHE
Print, Type or Stamp Commissioned Name of Notary Public - State of Florida

My Commission Expires:
My Commission Number:
My Notary Seal:

Personally known X Produced Identification _____

Type of Identification Produced _____

(S:\7\CLIENTS\KLATT\AFFIDAVT.KFP 845-16)

FILE ON OR BEFORE DECEMBER 31, 1995 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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JAN -5 AM 7:34

1. Name of Limited Partnership

1a. DOCUMENT # A95000002620

THE KLATT FAMILY LIMITED PARTNERSHIP #1

DO NOT WRITE IN THIS SPACE mtn

Mailing Address / Principal Office Address

Post Office Drawer 1477
Boynton Beach, FL 33425

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

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

3. Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
12/22/95	N/A	FL

5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date	C. FEI Number	X Applied For / Not Applicable	7. CERTIFICATE OF STATUS REQUIRED
$2,045,300.00	$2,045,300.00	Applied For		[redacted]

6. **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 + $138.7[illegible]
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

Michael A. Schroeder, Esq.
Schroeder and Larche, P.A.
One Boca Place, Suite 319 A
2255 Glades Road
Boca Raton, Florida 33431

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite Apt # etc
City FL Zip Code

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, 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 _____

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
Klatt, Inc.	4269 Hypoluxo Road	Lantana, FL 33462-3401	P95000095304

000001686240
-01/11/96--01020--017
****576.25 ****576.25

CR2E003 (6/95)

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)(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.

SIGNATURE Bill R. Winchester DATE 12/29/95
KLATT, INC., Its: General Partner
Typed or Printed Name of General Partner Signing Form Bill R. Winchester, Vice President Telephone Number