

A96000001128

Charter Number Only

5/17/96 DDLID

Mike Castle
Requestor's Name
1390 Brickell Ave 3/F
Address
Miami FL
City State ZIP Phone
371-5540

VALIDATION ONLY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 17 AM 9:53

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****148.75 ****148.75

CORPORATION(S) NAME

BETA CAPITAL INTERNATIONAL LTD

W96000010771

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Reservation | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call If Problem | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Mail Out |
| <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up | |

Name	
Availability	
Document	
Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

FILED
R. AGENT FEE
C. COPY
TOTAL
N. BANK
BALANCE DUE
REFUND

RECEIVED
56 MAY 21 PM 9:53
DIVISION OF CORPORATIONS

Empire Toll Free: 1-800-432-3028

CERTIFICATE OF LIMITED PARTNERSHIP
OF
BETA CAPITAL INTERNATIONAL, LTD.

Pursuant to the provision of the Florida Revised Uniform Limited Partnership Act (1986), and §620.101 of the Florida Statutes, I, undersigned, being all of the Partners of BETA CAPITAL INTERNATIONAL, LTD., hereby duly execute and file with the Florida Secretary of State this Certificate of Limited Partnership.

1. The name of the limited partnership is BETA CAPITAL INTERNATIONAL, LTD.
2. The business address and the mailing address of the limited partnership is 999 Brickell Avenue, Suite 600, Miami, Florida 33131.
3. The name of the registered agent for service of process required by §620.105 of the Florida Statutes is :

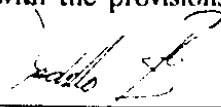
ALVARO CASTILLO B.

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

**CASTILLO & ASSOCIATES
1390 Brickell Avenue
Suite 200
Miami, Florida 33131**

5. Acceptance of Appointment of Registered Agent:

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



ALVARO CASTILLO B., Registered Agent

Dated: May 29, 1996

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

MARIA E. HEALY
999 Brickell Avenue
Suite 600
Miami, Florida 33131

7. The name and business address of the limited partner is as follows:

MARIA CASTILLO
999 Brickell Avenue
Suite 600
Miami, Florida 33131

8. The latest date upon which the limited partnership is to dissolve is December 31, 2045.

IN WITNESS WHEREFORE, the General Partner has executed the foregoing Certificate of Limited Partnership on the 29 day of May, 1996 in accordance with §620.114 of the Florida Statutes.

BETA CAPITAL INTERNATIONAL, LTD., a Florida
limited partnership

BY: Maria E. Healy
MARIA E. HEALY, General Partner

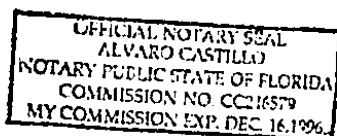
STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, personally appeared MARIA E. HEALY, to me personally known or who produced _____ as identification, and she did acknowledge to me that she executed the foregoing Certificate of Limited Partnership on BETA CAPITAL INTERNATIONAL, LTD., a Florida Limited Partnership, as her free act and deed.

WITNESS my hand and official seal this 29 day of May, 1996.

Alvaro Castillo
Notary Public, State of Florida

My Commission Expires:



**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of BETA CAPITAL INTERNATIONAL, LTD., a Florida Limited Partnership, certify:

1. Affiant is the general partner of the Company.
2. Company has at least two partners.
3. The amount anticipated to be contributed by the general partner is as follows:

Maria E. Healy \$500.00

4. The amount of capital contribution to date of the limited partners is as follows:

Maria Castillo \$500.00

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$500.00.

Signed this 24 day of May, 1996.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Maria E. Healy
MARIA E. HEALY, General Partner

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, personally appeared MARIA E. HEALY, to me personally known or who produced _____ as identification, and she did acknowledge to me that she executed the foregoing Certificate of Limited Partnership on BETA CAPITAL INTERNATIONAL, LTD., a Florida Limited Partnership, as her free act and deed.

WITNESS my hand and official seal this 24 day of May, 1996.

Alvaro Castillo
Notary Public, State of Florida

My Commission Expires:

