

Chapter Number 0  
**A96000001429**

13026

Quintana & Associates

Requester's Name

338 MINORCA AVE.

Address

Coral Gables FL 33134.

City

State

ZIP

Phone

446-0300-K

VALIDATION ONLY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JUL 31 AM 11:15

500001912345  
-08/05/96--01028--004  
\*\*\*1785.00 \*\*\*1785.00

CORPORATION(S) NAME

Lavmor, Ltd.

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

Empire Toll Free: 1-800-432-3028

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

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R. AGENT FEE 17.50  
2. COPY 25  
TOTAL 1785 BK  
N. BANK  
BALANCE DUE  
7/31/96

**CERTIFICATE OF LIMITED PARTNERSHIP OF  
LAVMOR, LTD.  
a Florida Limited Partnership**

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FILED  
SECRETARY OF STATE  
JAN 31 1996

The undersigned general partners desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Section 620.108 of the Florida Statutes, hereby state the following:

1. The name of the Partnership is LAVMOR, LTD.
2. The address of the office of the Partnership shall initially be at 338 Minorca Avenue, Coral Gables, Florida 33134.
3. The name and address of the agent for service of process on the Partnership is J. Luis Quintana, Esq., 338 Minorca Avenue, Coral Gables, Florida 33134.
4. The names and business addresses of the general partner is as follows:  
  
FERN MANAGEMENT, INC., a Florida Corporation  
338 Minorca Avenue  
Miami, Florida 33165      896080060050
5. The mailing address of the Partnership is 338 Minorca Avenue Coral Gables, Florida 33134.
6. The latest date upon which the Partnership shall dissolve is December 31, 2020.

THIS INSTRUMENT PREPARED BY:  
J. LUIS QUINTANA, ESQUIRE  
QUINTANA & ASSOCIATES, P.A.  
338 MINORCA AVENUE  
CORAL GABLES, FLORIDA 33134  
TELEPHONE (305) 446-0300  
FLORIDA BAR #768987

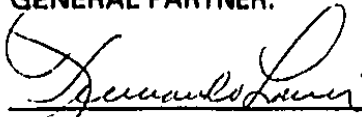
PAGE TWO  
CERTIFICATE OF LIMITED PARTNERSHIP OF  
LAVMOR, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JUL 31 2:11 PM '96

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.

IN WITNESS WHEREOF, this certificate of Limited Partnership has been executed by all of the general partner of July 28, 1996.

GENERAL PARTNER:

  
\_\_\_\_\_  
Fernando Lavo, President of  
FERN MANAGEMENT, INC.

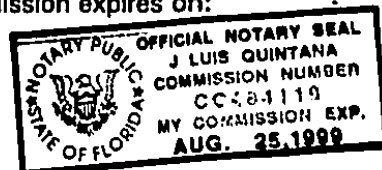
STATE OF FLORIDA       )  
                                  )  
COUNTY OF DADE       ) ss.

Before me, a Notary Public authorized in the State and County set forth above, personally appeared Fernando Lavo known to me and known by me to be the person(s), who, as President of the General Partner, FERN MANAGEMENT, INC. executed the foregoing Certificate of Limited Partnership of LAVMOR, LTD. and acknowledged before me that he executed the above Certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this July 28, 1996.

  
\_\_\_\_\_  
NOTARY PUBLIC

My commission expires on:



**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned constituting all of the general partners of  
**LAVMOR, LTD.**, a Florida Limited Partnership, certify as follows:

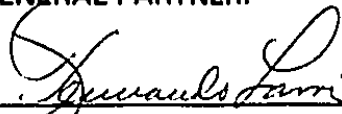
1. The amount of capital contributions to date of the limited partners is \$0.
2. The total amount contributed or anticipated to be contributed by the limited partners at this time totals \$594,000.00.

Dated this July 28, 1996.

FURTHER AFFIANT SAYETH NOT.

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

GENERAL PARTNER:

  
\_\_\_\_\_  
Fernando Lavoie, President of  
FERN MANAGEMENT, INC.

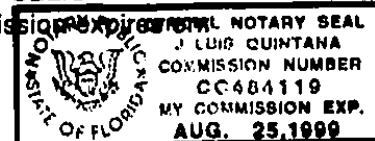
STATE OF FLORIDA     )  
                                  )  
COUNTY OF DADE     ) ss.

Before me, a Notary Public authorized in the State and County set forth above, personally appeared Fernando Lavoie known to me and known by me to be the person(s), who, as President of the General Partner, FERN MANAGEMENT, INC. executed the foregoing Affidavit and acknowledged before me that he executed the above Certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this July 28, 1996.

  
\_\_\_\_\_  
NOTARY PUBLIC

My commission expires Aug. 25, 1999

  
NOTARY SEAL  
LUIS QUINTANA  
COMMISSION NUMBER  
CC484119  
MY COMMISSION EXP.  
AUG. 25, 1999

**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

**FOR LAVMOR, LTD.**

**a Florida Limited Partnership**

66 JUL 31 AM 11:15  
SECRET  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

Having been named as registered agent for LAVMOR, LTD., a Florida Limited Partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf on 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 Fla. Stat. 620.192.

REGISTERED AGENT/OFFICE  
Quintana & Associates, P.A.  
338 Minorca Avenue  
Coral Gables, Florida 33134  
Telephone (305) 446-0300  
Telefax (305) 446-2070

By: \_\_\_\_\_

J. L. Quintana, Esq.

STATE OF FLORIDA )

COUNTY OF DADE )

ss.

Before me, a Notary Public authorized in the State and County set forth above, personally appeared J. Luis Quintana known to me and known by me to be the person(s), who, as Registered Agent, executed the foregoing Acceptance of Registered Agent for the LAVMOR, LTD. a Florida Limited Partnership and acknowledged before me that he executed the above Acceptance.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this July 28, 1996.

NOTARY PUBLIC

My commission expires on: \_\_\_\_\_

