

MICHAEL BEDZOW
GARY A. KORN
GARY L. BROWN
RICHARD C. WOLFE
PAUL R. LIFTON
GEORGE A. MINSKI
ALAN B. SCHNEIDER
DAVID C. JACOBSON
JENNIFER LEVIN
NEAL I. SKLAR
MICHAEL A. MARACINI
FLORENTINO L. GONZALEZ
JANI KLIMT SINGER

OF COUNSEL
MARCY S. RIESNIK

BEZOW, KORN & KORN, P.A.
ATTORNEYS AT LAW
SUITE 200
2000 E. CAYNE BOULEVARD
TALLAHASSEE, FLORIDA 32300
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MAIL TO:
P.O. BOX 100
HALLANDALE, FLORIDA 33008

(BROWARD) (954) 523-6001

TELECOPIERS:
MAIN (305) 936-9902
REAL ESTATE (305) 932-6743
LITIGATION (305) 936-2799

ALAN J. KAN
(197 - 1994)

August 14, 1996

VIA: **FEDERAL EXPRESS**
Secretary of State
409 E. Gaines Street
Tallahassee, FL 32399

000001923700
-08/16/96--01005--001
***2155.00 ***1785.00

To whom it may concern:

Enclosed please find the following for filing:

1. Application for Registration of Fictitious Name together with the filing fee of \$50.00 for same.
2. Certificate of Limited Partnership of F. Pizzorni Limited Partnership together with the filing fee of \$1,750.00 and the \$35.00 for the designation of the registered agent. Also enclosed is an additional copy of the Certificate to return to the undersigned stamped.
3. Articles of Dissolution of Spectrum Magazine, together with the filing fee of \$35.00. Also enclosed is an additional copy of the Articles of Dissolution to return to the undersigned stamped.
4. Articles of Organization of Fashion Spectrum Magazine, L.C. together with the filing fee of \$250.00 and the \$35.00 for the designation of the registered agent. Also enclosed is an additional copy of the Articles to return to the undersigned stamped.

If you should need any additional information, please contact my office immediately.

Very truly yours,

David C. Jacobson
DAVID C. JACOBSON
For the Firm

DCJ/ecm

DCJ3394 0001467097/081496

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 15 AM 9:47

BK
8/15/96

CERTIFICATE OF LIMITED PARTNERSHIP
OF

F. PIZZORNI LIMITED PARTNERSHIP

1. F. PIZZORNI LIMITED PARTNERSHIP
(Name of Limited Partnership)
2. 444 Brickell Avenue Miami, Florida 33131
(The Business Address of Limited Partnership)
3. Richard C. Wolfe
(Name of Registered Agent for Service of Process)
4. 20803 Biscayne Boulevard, Suite 200, Aventura, FL 33180
(Florida Street Address for Registered Agent)
5. [Signature]
(Registered Agent must sign here to accept designation as
for Registered Agent for Service of Process)
6. 444 Brickell Avenue Miami, Florida 33131
(The Mailing Address of the Limited Partnership)
7. The latest date upon which the Limited Partnership is to be
dissolved is December 31, 2039.
8. NAME AND ADDRESS OF THE SOLE GENERAL PARTNER:
ITALCAMBIO INTERNATIONAL COMPANY, INC.⁹
a Florida corporation,
444 Brickell Avenue
Miami, Florida 33131.

Signed this 12 day of August, 1996.

Signature of the Sole General Partner:

ITALCAMBIO INTERNATIONAL
COMPANY, INC.⁹ a Florida
corporation.

By [Signature]
FRANCO PIZZORNI,
Vice President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 15 PM 4:01

L54913

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting the sole General Partner of **F. PIZZORNI LIMITED PARTNERSHIP**, a Florida Limited Partnership, certifies as follows:

The amount of capital contributions to date of the limited partners is \$ 369,823 (Three hundred sixty nine thousand eight hundred twenty three)

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 369,823.00

This 12 day of August, 1996.

FURTHER AFFIANT SAYETH NOT.

Under the 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.

**ITALCAMBIO INTERNATIONAL
COMPANY, INC.**, a Florida
corporation

By [Signature]
FRANCO PIZZORNI,
Vice President

STATE OF FLORIDA

COUNTY OF DADE

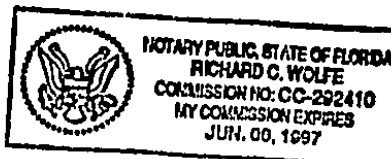
SS;

The execution of the foregoing instrument was acknowledged before me this 12 day of August, 1996, by **FRANCO PIZZORNI**, as Vice President of **ITALCAMBIO INTERNATIONAL COMPANY, INC.**, a Florida corporation, General Partner of **F. PIZZORNI LIMITED PARTNERSHIP**, who is personally known to me or has produced [Signature] as identification, and who did take an oath.

My Commission Expires:

[Signature]
Notary Public, State of Florida

Print Name: _____



MICHAEL BIDDOW
GARY A. KORN
GARY L. BROWN
RICHARD C. WOLFE
PAUL R. LIPTON
GEORGE A. MINSKI
ALAN B. SCHINDLER
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ALAN J. KAN
(1947 - 1994)

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Very truly yours,

David C. Jacobson
DAVID C. JACOBSON
For the Firm

DCJ/ecm

DCJ3994 000167077081496

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
AUG 15 AM 9:47

NYK
8/15/96

CERTIFICATE OF LIMITED PARTNERSHIP
OF

F. PIZZORNI LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 15 PM 4:01

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(Name of Limited Partnership)
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ITALCAMBIO INTERNATIONAL COMPANY, INC.
a Florida corporation,
444 Brickell Avenue
Miami, Florida 33131.

L54913

Signed this 12 day of August, 1996.

Signature of the Sole General Partner:

ITALCAMBIO INTERNATIONAL
COMPANY, INC. a Florida
corporation

By [Signature]
FRANCO PIZZORNI,
Vice President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting the sole General Partner of **F. PIZZORNI LIMITED PARTNERSHIP**, a Florida Limited Partnership, certifies as follows:

The amount of capital contributions to date of the limited partners is \$ 369,823 (Three Hundred Sixty Nine Thousand Eight Hundred Twenty Three)

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 369,823.00

This 12 day of August, 1996.

FURTHER AFFIANT SAYETH NOT.

Under the 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.

**ITALCAMBIO INTERNATIONAL
COMPANY, INC.** a Florida
corporation

By [Signature]
FRANCO PIZZORNI,
Vice President

STATE OF FLORIDA

COUNTY OF DADE

SS;

The execution of the foregoing instrument was acknowledged before me this 12 day of August, 1996, by **FRANCO PIZZORNI**, as Vice President of **ITALCAMBIO INTERNATIONAL COMPANY, INC.**, a Florida corporation, General Partner of **F. PIZZORNI LIMITED PARTNERSHIP**, who is personally known to me or has produced Personally Known as identification, and who did take an oath.

My Commission Expires:

[Signature]
Notary Public, State of Florida

Print Name: _____

