



**A96000001628**

**ROGER BESU, P.A., Attorneys at Law**

**FILED**

**96 AUG 28 AM 11:59**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**815 N.W. 57th Avenue, Suite 484  
Meridian Executive Centre  
On the Blue Lagoon  
Miami, Florida 33126  
Telephone: (305) 262-7300  
Fax: (305) 262-7212  
E-MAIL:  
71241.3205@COMPUSERVE.COM**

<sup>26</sup>  
**August 20, 1996**

**Secretary of State  
Bureau of Commercial Recording  
DIVISION OF CORPORATIONS  
P. O. Box 6327  
Tallahassee, FL 32314**

**RE: HAMMOCKS MANOR PARTNERS LTD.**

**800001934818  
-08/28/96--01090--002  
\*\*\*1846.25 \*\*\*1846.25**

**Dear Sir:**

**Enclosed please find the CERTIFICATE OF LIMITED PARTNERSHIP and AFFIDAVIT OF CAPITAL CONTRIBUTIONS of the subject Partnership, together with our check in the amount of \$1846.25 representing the following:**

|  |                 |
|--|-----------------|
| <b>Filing Fee</b>                          | <b>1750.00</b>  |
| <b>Designation of Registered Agent fee</b> | <b>35.00</b>    |
| <b>Certified Copy of filing</b>            | <b>52.50</b>    |
| <b>Certificate</b>                         | <b>8.75</b>     |
| <b>TOTAL:</b>                              | <b>1,846.25</b> |

**Please send the undersigned the certified copies requested.**

**Should you have any questions, please do not hesitate to contact us.**

**Sincerely yours,**

**ROGER BESU  
For the Firm**

**RB:ic**

**Enc.12**

|                   |     |
|-------------------|-----|
| Name              |     |
| Availability      | KWM |
| Document Examiner | KWM |
| Updater           | KWM |
| Updater Verifier  | KWM |
| Adm. Judgment     | KWM |
|                   | KWM |

**8-28**

**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
HAMMOCKS MANOR PARTNERS LTD.**

**FILED**

96 AUG 28 AM 11:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited partnership shall be **HAMMOCKS MANOR PARTNERS LTD.**

2. The business address of the Limited Partnership is as follows:

Meridian Executive Center  
at the Blue Lagoon, Suite 484  
815 North West 57th. Avenue  
Miami, Florida 33126

3. The name of the Registered Agent for service of process shall be as follows: **ROGER BESU.**

4. The Florida Street Address for the Registered Agent shall be as follows:

Meridian Executive Center  
at the Blue Lagoon, Suite 484  
815 North West 57th. Avenue  
Miami, Florida 33126

5. Signature of the Registered Agent accepting designation as Registered Agent for Service of Process:

  
**ROGER BESU, REGISTERED AGENT**

6. The mailing address of the limited partnership shall be as follows:

Meridian Executive Center  
at the Blue Lagoon, Suite 484  
815 North West 57th. Avenue  
Miami, Florida 33126

7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2,046

8. NAME OF GENERAL PARTNER(S) SPECIFIC ADDRESS:

HAMMOCKS MANOR HOMES INC.- P960000 101616  
815 N.W. 57 AVE.  
Suite 484  
Miami, Florida 33126

9. Signed this 15th day of August, 1996.

Signature of all general partners:

HAMMOCKS MANOR HOMES, INC.  
(GENERAL PARTNER)

BY:

  
~~JOSE DANIEL FERNANDEZ~~  
President

## **AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

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

The amount of capital contributions to date of the limited partners is \$1,000,000.00

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$1,000,000.00.

This 15th 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.

**HAMMOCKS MANOR HOMES INC.**  
a Florida corporation  
(General Partner)

BY:

  
**JOSE DANIEL FERNANDEZ**  
President

STATE OF FLORIDA )

COUNTY OF DADE )

) ss

The foregoing instrument was acknowledged before me this 15th day of August, 1996, by Jose Daniel Fernandez, President of Hammocks Manor Homes, Inc., a Florida corporation, who is personally known by me and who did take an oath.

  
NOTARY PUBLIC

My commission expires:

