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### CERTIFICATE OF LIMITED PARTNERSHIP

OF

### THE DAVID FAMILY LIMITED PARTNERSHIP

The parties hereto do hereby certify that an Agreement was made effective the 8th da October, 1996, at Miami, Florida, by the following, herein called "General Partner":

### GLORIA F. DAVID

And by the following, hereinafter referred to as "Limited Partners":

### GLORIA F. DAVID, MICHAEL J. DAVID AND JOAN E. DAVID

The parties hereto, on the date described above, formed a Limited Partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act.

- 1. Name. The Name of the Limited Partnership is THE DAVID FAMILY LIMITED PARTNERSHIP.
- Principal Place of Business. The location of the principal place of business of the
   Limited Partnership is 8280 S.W. 105th Street, Miami, Florida 33156. This is also the mailing address.
- 3. Registered Agent and Office. The registered agent for service of process for this Limited Partnership is GLORIA F. DAVID at 8280 S.W. 105th Street, Miami, Florida 33156.
  - 4. The General Partner. The General Partner of the Limited Partnership is:

General Partner

Business Address

GLORIA F. DAVID

8280 S.W. 105th Street Miami, Florida 33156.

Prepared By: JONATHAN H. GREEN

799 Brickell Plaza, Suite 700 Miami, Florida 33131

Florida Bar Number: 307513

- 5. Term. The Limited Partnership shall begin on the date this certificate is filed with the Florida Department of State and shall continue for a period of forty-five (45) years thereafter unless sooner dissolved by law or by agreement of the parties hereto.
- 6. Authority to Execute and File this Certificate. The General Partner acknowledges and states that she is authorized to execute and file this Certificate for and on behalf of THE DAVID FAMILY LIMITED PARTNERSHIP.

EXECUTED IN DUPLICATE ORIGINAL this 8th day of October, 1996.

General Partner: GLORIA F. DAVID

By: four facil

STATE OF FLORIDA ) SS COUNTY OF DADE )

BEFORE ME, the undersigned authority, on this day personally appeared GLORIA F. DAVID known to me to be the person whose name is subscribed to the foregoing instrument or produced and has acknowledged to me that she executed the same for the purposes and considerations therein expressed and as the authorized representative of THE DAVID FAMILY LIMITED PARTNERSHIP.

GIVEN UNDER MY HAND and seal of office, this 8th day of October. 1996.

OFFICIAL NOTARY SEAL ANDREW I LEWIS NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC543431 MY COMMISSION EXP. JUNE 19,2000

Andrew I. Lewir Printed or Typed Name of Notary)

My Commission Expires:

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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DAVID FAMILY LIMITED PARTI	YEVOUIL	, a riorida Limited
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### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING THE AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Chapter 620,105 Florida Statutes, the following is submitted in accordance with said Act:

That THE DAVID FAMILY LIMITED PARTNERSHIP, desiring to organize under the laws of the State of Florida, with its principal place of business as indicated in the Certificate of Limited Partnership in the City of Miami, County of Dade, State of Florida, has named GLORIA F. DAVID whose address is 8280 S.W. 105<sup>th</sup> Street, Miami, Florida 33156 as its agent to accept service of process within the state.

## **ACKNOWLEDGMENT**

Having been named to accept service of process for the above limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity, and agree to comply with provisions of said Act relative to keeping open said office.

Dated this 8th day of October, 1996.

GLORIA F. DAVID