

1201 HAYS STREET
TALLAHASSEE, FL 32301-2607

800-342-8086

A96000002112



PREMIER HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 160567 4718535 400002015184--7
-11/26/96--01161--005

***1750.00 ***1750.00

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : November 19, 1996

ORDER TIME : 2:31 PM

ORDER NO. : 160567-005

CUSTOMER NO: 4718535

CUSTOMER: James E. Willis, Esq
PORTER WRIGHT MORRIS & ARTHUR

Suite 400
4501 Tamiami Trail North
Naples, FL 33940

400002015184--7
-11/26/96--01161--006
*****35.88 *****35.00

DOMESTIC FILING

NAME: GREENBERG FAMILY
LIMITED PARTNERSHIP

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: W. Charles Earnest

EXAMINER'S INITIALS: _____

J. IAA _____
FILING 1750.00
R. AGENT FEE 35.00
C. COPY 52.50
TOTAL \$1,837.50
N. BANK _____
BALANCE DUE _____
REFUND _____

RECEIVED
96 NOV 19 PM 3:33
DIVISION OF CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV 19 AM 10:45

400002015184--7
-11/26/96--01161--007
*****52.50 *****52.50

CERTIFICATE OF THE GREENBERG FAMILY LIMITED PARTNERSHIP

THIS CERTIFICATE is executed on September 12, 1996, with respect to the agreement of The Greenberg Family Limited Partnership ("the partnership").

1. Name. The partnership's name is The Greenberg Family Limited Partnership.
2. Partnership's Business. The partnership's business is owning, managing, and selling securities, and all other related acts. The partnership may also do all things not otherwise illegal under the laws of the State of Florida.
3. Registered Agent. The name and post office address of the partnership's registered agent is:

SAMUEL GREENBERG
2308 Gulf Shore Boulevard North
Naples, Florida 34103

Samuel Greenberg is the sole general partner. He resides and has his business address within the State of Florida.

4. Specified Office. The post office address of the office at which its records are kept is:

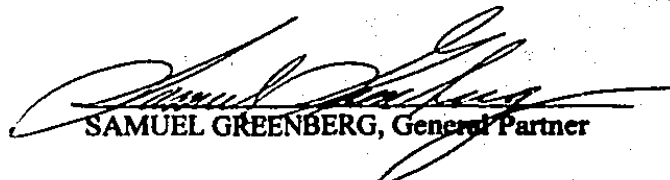
SAMUEL GREENBERG
2308 Gulf Shore Boulevard North
Naples, Florida 34103

5. Partners. The name and post office address of the general partner is:

SAMUEL GREENBERG
2308 Gulf Shore Boulevard North
Naples, Florida 34103

6. Dissolution. The latest date on which the limited partnership is to be dissolved and its affairs wound up is December 31, 2020.

IN WITNESS WHEREOF, the undersigned sole general partner has signed and sealed this certificate, on the day and year first above written.


SAMUEL GREENBERG, General Partner

FILED
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DIVISION OF CORPORATIONS
NOV 19 AM 10:14

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 12th day of September, 1996, by SAMUEL GREENBERG, who (x) is personally known to me or () has produced _____ as identification and who did take an oath.

Tricia A. Krabill
Notary Public, State of Florida

My Commission Expires: _____
My Commission Number is: _____

NAPLES/32040 01



FILED STATE
SECRETARY OF CORPORATIONS
96 NOV 19 AM 10:45

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting all of the general partners of GREENBERG FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership, certify:

The amount of the capital contributions to date of the limited partners is \$ -0-

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$855,000.00.

FURTHER AFFIANT SAYETH NAUGHT...

UNDER THE PENALTIES OF PERJURY I DECLARE THAT I HAVE READ THE FOREGOING AND KNOW THE CONTENTS THEREOF AND THAT THE FACTS STATED HEREIN ARE TRUE AND CORRECT.

GREENBERG FAMILY LIMITED PARTNERSHIP,
a Florida Limited Partnership

BY: 

Samuel Greenberg, General Partner

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 18th day of November, 1996, by Samuel J. Greenberg, as General Partner of the GREENBERG FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership, [] who is personally known to me or [] who produced Fla. Dr. Lic. #6451-790-37-211 as evidence of identification. (Notary must check appropriate language.) An oath was not administered.

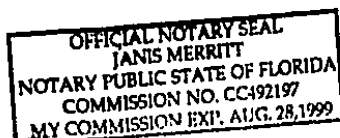
(NOTARY SEAL HERE)


NOTARY PUBLIC

(Printed Name of Notary)

My commission expires:

NAPLES/56330.01



FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
96 NOV 19 AM 10:45