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₩ Mail out	Will wait Photocop	y Certificate of	Status
TO WILLIAM STATE	AMENDMENTS TO		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/D	Pirector	is <b>8</b>
Limited Liability	Change of Registered Agent		RECEIVED 5 MC -6 PH 4 SION OF CORPORAL
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OTHER PLANCES:	REGISTRATION)		
Annual Report	Foreign	G. TAX FILING	
Fictitious Name	Limited Partnership	R. AGENT FEE 3	<u>0.ω</u> Σ.ω
Name Reservation	Reinstatement	TOTAL LEGS	<b>(5</b> )
	Trademark	IL MANK	<u> </u>
<u> </u>	Other	BALANCE DUE	
<u> </u>			12/1/96

Examiner's Initials

## CERTIFICATE OF LIMITED PARTMERSHIP OF WATERFORD CENTRE, LTD.

The undersigned, desiring to form a limited partnership pursuant to Section 620.108 of the Florida Revised Uniform Limited Partnership Act, does hereby certify:

- 1. The name of the partnership is: WATERFORD CENTRE, LTD.
- The mailing and business address of the partnership is:
   2600 Douglas Road, Suite 505, Coral Gables, FL 33134.

The partnership shall maintain the records required by Section 620.106 at such office.

3. The name and address of the partnership's agent for service of process is:

Waterford Centre, Inc., 2600 Douglas Road, Suite 505, Coral Gables, FL 33134. Pg 5000040476

4. The name and the business address of the general partner is:

Waterford Centre, Inc., 2600 Douglas Road, Suite 505, Coral Gables, FL 33134.

5. The latest date upon which the partnership is to dissolve is:

December 31, 2050.

6. An affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners is attached as Exhibit A.

Under 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.

WATERFORD CENTRE, INC., General Partner

Steen Todal Ferith

Having been named to accept service of process for WATERFORD CENTRE, LTD., at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Date: 11-18-76 WATERFORD CENTRE, INC., Registered Agent

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## EXHIBIT A

## AFFIDAVIT

STATE OF FLORIDA COUNTY OF DADE

The undersigned, as President of WATERFORD CENTRE, INC., General Partner of WATERFORD CENTRE, LTD., a Florida limited partnership, hereby certifies:

1. The amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners are as follows:

Amount contributed by limited partners

Additional amount anticipated to be contributed by limited partners 495,000 495,000

This Affidavit is made pursuant to Section 602.108, Florida Statutes.

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.

WATERFORD CENTRE, LTD.

President of Waterford Cen

General Partner