

A97000002409



ACCOUNT NO. : 072100000032

REFERENCE : 589921 4338458

AUTHORIZATION : *Patricia Pujut*

COST LIMIT : \$ 1846.25

ORDER DATE : November 5, 1997

ORDER TIME : 9:47 AM

ORDER NO. : 589921-015

CUSTOMER NO: 4338458

CUSTOMER: Ms. Patti Roehl
OCWEN FINANCIAL CORPORATION

The Forum - Suite 531
1675 Palm Beach Lakes Blvd.
West Palm Beach, FL 33401

DOMESTIC FILING

NAME: OAIC FLORIDA PARTNERSHIP, L.P.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kim Clemons

EXAMINER'S INITIALS:

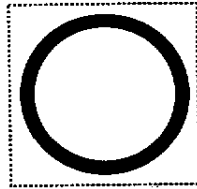
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97 NOV -5 PM 3:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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FILE
Second

RECEIVED
97 NOV -5 AM 11:27
DIVISION OF CORPORATION

BK
11/5/97



O C W E N

October 29, 1997

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

RE: OAIC Florida Partnership, L.P.

Ladies and Gentlemen:

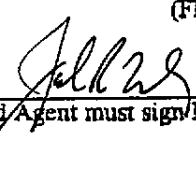
Enclosed is an original and one (1) copy of the Certificate of Limited Partnership and Affidavit of Capital Contributions for Florida Limited Partnership and a check for \$_____ made payable to The Department of State.

FROM: Ocwen Capital Corporation
1675 Palm Beach Lakes Blvd. 10A
West Palm Beach, FL 33401

Patti Roehl
(561) 681-8797

CERTIFICATE OF LIMITED PARTNERSHIP

LIMITED PARTNERSHIP

1. OAIC FLORIDA PARTNERSHIP, L.P.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1675 PALM BEACH LAKES BLVD., WEST PALM BEACH, FL 33401
(Business address of Limited Partnership)
3. JOHN R. ERBEY
(Name of Registered Agent for Service of Process)
4. 1675 PALM BEACH LAKES BLVD., WEST PALM BEACH, FL 33401
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1675 PALM BEACH LAKES BLVD., WEST PALM BEACH, FL 33401
(Mailing Address of the Limited Partnership)

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SECRETARY OF STATE

7. The latest date upon which the Limited Partnership is to be dissolved is: 50 Years

8. Name(s) of general partner(s):

Street address:

Ocwen Florida General, Inc.

1675 Palm Beach Lakes Blvd.
West Palm Beach, FL 33401

P970000 94862

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this _____ day of _____, 19 _____.

Signature of all general partners:

OCWEN FLORIDA GENERAL, INC.

By: 

General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of OAIC FLORIDA
LIMITED PARTNERSHIP
PARTNERSHIP, L.P.

a Florida Limited Partnership, certify:

The amount of 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 \$ 5,000,000.00

Signed this 4 day of November, 19 97

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the
contents thereof and that the facts stated herein are true and correct.*

OCWEN FLORIDA GENERAL, INC.

By:

General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

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TALLAHASSEE FLORIDA
SECRETARY OF STATE