

ACCOUNT NO. : 072100000032

, 5868<del>44)</del> ., 3487A

COST LIMIT : \$ 87.50

ORDER DATE: November 3, 1997

ORDER TIME: 11:26 AM

ORDER NO. : 586844-005

CUSTOMER NO: 3487A

CUSTOMER: Paula M. Moser, Legal Asst

ICARD MERRILL CULLIS TIMM

FUREN & GINSBURG, PA

2033 Main Street, Suite 101

P. O. Drawer 4195 Sarasota, FL 34237

#### DOMESTIC FILING

NAME: PLAZA DE FLORES FINANCE, LTD.

### EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Glisar

EXAMINER'S INITIALS:



800002336068--0



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 4, 1997

JEANINE GLISAR CSC NETWORKS TALLAHASSEE, FL

SUBJECT: PLAZA DE FLORES FINANCE, LTD.

Ref. Number: W97000024958

We have received your document for PLAZA DE FLORES FINANCE, LTD. and the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

Before this partnership can be filed, the corporate general partner -- PLAZA DE FLORES DEVELOPMENT CORPORATION -- must be reinstated. The cost to reinstate the corporation is \$750.00. A reinstatement form is enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 497A00053229



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# CERTIFICATE OF LIMITED PARTNERSHIP OF PLAZA DE FLORES FINANCE, LTD. A FLORIDA LIMITED PARTNERSHIP

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, hereby states:

- 1. The name of the Partnership is PLAZA DE FLORES FINANCE, LTD.
- 2. The address of the office of the Partnership is 2 N. Tamiami Trail, Suite 710, Sarasota, Florida 34236.
- 3. The name and address of the agent for service of process on the Partnership is Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A., 2033 Main Street, Suite 600, Sarasota, Florida 34236.
- 4. The name and business address of the sole general partner is Plaza De Flores Development Corporation, 2 N. Tamiami Trail, Suite 710, Sarasota, Florida 34236.
- 5. The mailing address of the Partnership is 2 N. Tamiami Trail, Suite 710, Sarasota, Florida 34236.
- 6. The latest date upon which the Partnership shall dissolve is December 31, 2017.

The execution of this certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the sole General Partner of PLAZA DE FLORES FINANCE, LTD. this 28+15 day of \_\_\_\_\_\_\_, 1997.

GENERAL PARTNER:

PLAZA DE FLORES DEVELOPMENT CORPORATION

SOL ROTER, President

## ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for PLAZA DE FLORES FINANCE, LTD., a Florida Limited Partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I hereby agree to act in that capacity, and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

**REGISTERED AGENT:** 

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A.

By:\_

Robert E. Messick, Its authorized agent

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

## STATE OF FLORIDA COUNTY OF SARASOTA

BEFORE ME, the undersigned authority, personally appeared Robert E. Messick as Director and authorized agent of Plaza De Flores Development Corporation, a Florida Corporation, the sole general partner of PLAZA DE FLORES FINANCE, LTD. (the "Partnership"), who, upon being duly sworn, certified as follows:

- 1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, one thousand (\$1,000.00) dollars.
- 2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

Under 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.

Robert E. Messick

Sworn to and subscribed before me this 27th day of October, 1997 by Robert E. Messick [X] who is personally known to me; or [ ] who has produced \_\_\_\_\_ as identification.

Print Name:

Notary Public

My Commission Expires Paula Moser
MY COMMISSION # CC646781 EXPIRES
May 13, 2001

May 13, 2001 Bonded thru troy fain insurance, inc