Ag	7600002818
City/State	Address
	NAME(S) & DOCUMENT NUMBER(S), (if known):
3(Corp	oration Name) (Document #) SODOD23808139 -12/23/9701071019 oration Name) (Document #) oration Name) (Document #)
Walk in Mail out	Pick up time Will wait Photocopy Certificate of Status
NEW FILINGS Profit NonProfit Limited Liability	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Directution (With drawn)
Domestication Other OTHER FILINGS Annual Report	Merger
Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign K Limited Partnership Reinstatement Trademark
	Other Other Other

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CERTIFICATE OF LIMITED PARTNERSHIP

OF

RAHA ASSOCIATES II, LTD.

T DEC 23 PH 1: 10 The undersigned General Partner hereby forms a limited partnership pursuant and in accordance with the Florida Revised Uniform Limited Partnership Act (Florida Statute Section 620.101, et. seq.) as follows:

> 1. Name.

> > The name of the limited partnership (the "Partnership") is Raha Associates

II, Ltd.

2. Registered Office.

The registered office of the Partnership in the State of Florida is White & Case, 200 S. Biscayne Boulevard, Suite 4900, Miami, Florida 33131.

> Registered Agent. 3.

The name and address of the registered agent of the Partnership for service of process on the Partnership in the State of Florida is K. Lawrence Gragg, White & Case, 200 S. Biscavne Boulevard, Suite 4900, Miami, Florida 33131.

> 4. General Partner.

> > The name and business address of the General Partner is as follows:

Raha Associates II. Inc. C/o White & Case 200 S. Biscayne Boulevard Suite 4900 Miami, Florida 33131 Attn .: K. Lawrence Gragg

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5. <u>Mailing Address</u>.

The mailing address of the Partnership is c/o White & Case, 200 S. Biscayne Boulevard, Suite 4900, Miami, Florida 33131, Attn.: K. Lawrence Gragg.

6. <u>Dissolution</u>.

The latest date upon which the Partnership will dissolve is December 31,

2047.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership as of the 19^{th} day of December, 1997.

GENERAL PARTNER:

RAHA ASSOCIATES II, INC.

B

Anthony J. Ditton Vice President



CERTIFICATE DESIGNATING REGISTERED AGENT

AND REGISTERED OFFICE

In compliance with Florida Statutes Section 620.192, the following is submitted:

RAHA ASSOCIATES II, LTD., desiring to organize as a limited partnership under the laws of the State of Florida, has designated White & Case, 200 S. Biscayne Boulevard, Suite 4900, Miami, Florida 33131, as its initial Registered Office and has named K. Lawrence Gragg, located at said address as its initial Registered Agent.

RAHA ASSOCIATES II, INC.

General Partner

Anthony . DiNome Vice President



Having been named Registered Agent for the above stated limited partnership, at the designated Registered Office, the undersigned hereby accepts said appointment and agrees to comply with the provisions of Florida Statutes Section 620.192 relative to keeping open said office.

Rν Registered Agent

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Anthony J. DiNome, Vice President of Raha Associates II, Inc., a Florida corporation, constituting the sole general partner of Raha Associates II, Ltd., a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon being sworn, certified as follows:

1. The actual amount of capital contributions of the limited partners is \$1,000.00.

2. The total anticipated amount of the capital contributions of the limited partners is \$7,500.00.

This day of December, 1997.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and facts alleged are true, to the best of my knowledge and belief.

SS

General Partner:

RAHA ASSOCIATES II, INC.

Anthony J. Diffome Vice President

New YORK STATE OF FLORIDA New YORK COUNTY OF DADE

The foregoing instrument was acknowledged before me this <u>22</u> day of December _____, 1997, by Anthony J. DiNome, Vice President of Raha Associates II, Inc., a Florida corporation, who is personally known to me or who has produced ______ as identification.

Name: Notary Public State of Florida New York My Commission Expires: May 7, 1998

CARMEN S. PETERSON Notary Public, State of New York No. 01PE4966281 Qualified in New York County Commission Expires May 7, 1998