

A98000001569

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

98 JUN 26 PM 3:33

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Coral Point Partners, LTD

000002573230--6

-06/26/98--01025--007
****140.00 ****140.00

Name Availability	mbt
Document Examiner	mbt
Updater	mbt
Updater Verifier	mbt
Acknowledgement	mbt
W. P. Verifier	mbt

A98-1569

Signature _____

Requested by: CD

Name _____

Date 6/26/98

Time 11:00

Walk-In _____

Will Pick Up _____

- ☐ Art of Inc. File _____
- ☒ LTD Partnership File Cert
- ☐ Foreign Corp. File _____
- ☐ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☐ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- ☐ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____
- ☐ Courier _____

DIVISION OF CORPORATIONS

98 JUN 26 AM 10:25

RECEIVED

CERTIFICATE OF LIMITED PARTNERSHIP

OF

CORAL POINT PARTNERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUN 26 PM 3:33

1. The name of the limited partnership is CORAL POINT PARTNERS, LTD.

2. The mailing ^{and Principal} address of the limited partnership is 1401 Brickell Avenue, Suite 630, Miami, Florida 33131.

3. The name and address of the registered agent for service of process is Ira Levenshon, c/o M² Realty Corporation, 1401 Brickell Avenue, Suite 630, Miami, Florida 33131.

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

CPP, L.C.
1401 Brickell Avenue, Suite 630
Miami, Florida 33131

5. The latest update upon which the limited partnership is to dissolve is January 31, 2048.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership this 25 day of June 1998.

CPP, L.C., General Partner

By: 
Ira Levenshon, Member

CERTIFICATE OF REGISTERED AGENT

OF

CORAL POINT PARTNERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUN 26 PM 3:33

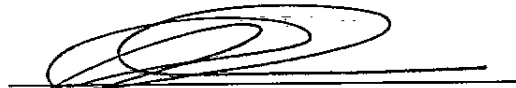
Pursuant to Section 620.105 of the Florida Revised Uniform Limited Partnership Act ("Act"), the following is submitted in compliance with said Act:

That CORAL POINT PARTNERS, LTD., desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Certificate of Limited Partnership, in the City of Miami, County of Dade, State of Florida, has named Ira Levenshon, c/o M² Realty Corporation, located at 1401 Brickell Avenue, Suite 630, Miami, Florida 33131, as its registered agent to accept service of process within the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated limited partnership, at the place designated in this Certificate, the undersigned hereby agrees to act in this capacity and agrees to comply with the provisions of the Florida Revised Uniform Limited Partnership Act relative to keeping open said office.

DATED this 25 day of JUNE, 1998.


Ira Levenshon

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUN 26 PM 3:33

AFFIDAVIT

STATE OF FLORIDA))ss
COUNTY OF DADE)

I, IRA LEVENSHON, upon being duly sworn, depose and say:

1. I am a Member of CPP, L.C., which is the general partner of CORAL POINT PARTNERS, LTD., a limited partnership organized under the laws of the State of Florida.

2. The limited partners have made capital contributions in the amount of \$1,000.00, which is the amount anticipated to be contributed by the limited partners.

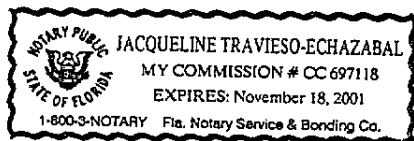
FURTHER AFFLIANT SAYETH NAUGHT.

Ira Levenshon

The foregoing instrument was sworn to, subscribed and acknowledged before me this

day of June, 1998, by IRA LEVENSHON, who is personally known to me or has produced

Known To Me as identification, and who did/did not take an oath.



Print: _____
 NOTARY PUBLIC
 State of Florida at Large

My commission expires: