FACSIMILE (561) 391-9944

100 NORTHEAST THIRD AVENUE SUITE 1100 FORT LAUDERDALE, FL 33301-1146

TELEPHONE (954) 462-3300 FACSIMILE (954) 763-2439

July 2, 1998

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

C. J. WAHRMAN III, J.D., LL.M.

Re:

Our File No. 18802/50566

The Ben Karp Family Limited Partnership,

Certificate of Limited Partnership

000002580930--07/06/98---01120--008 \*\*\*1837.50 \*\*\*1837.50

Dear Sir or Madam:

Enclosed are an executed original and duplicate original of the Certificate\_of Limited Partnership of the above-referenced limited partnership, together with check No. 1404 in the amount of \$1,837.50 representing the filing fee, the cost of a certified copy and the fee for filing a certificate designating a registered agent. Please file said Certificate of Limited Partnership and return a certified copy of same to this office upon completion of the filing process. I have enclosed a selfaddressed envelope for your use.

If you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

C. J. Wahrman III

CJW/jk Enclosures

cc: Mr. Ben Karp

H:\Library\EPD\Karp\sec't of state ltr

Name

Availability

Veritye

Acknowledg

W. P. Verifyel

## CERTIFICATE OF LIMITED PARTNERSHIP

OF

# THE BEN KARP FAMILY LIMITED PARTNERSHIP, a Florida Limited Partnership

FILED\*

98 JUL -6 PM 4: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Part I, Chapter 620 of the Florida Statutes, hereby states the following:

- 1. The name of the limited partnership is THE BEN KARP FAMILY LIMITED PARTNERSHIP (the "Partnership").
- 2. The address of the office of the Partnership is 1276 S.W. 113th Terrace, Pembroke Pines, Florida 33025.
- 3. The name and address of the agent for service of process on the Partnership are Ben Karp, 1276 S.W. 113th Terrace, Pembroke Pines, Florida 33025.
- 4. The name and business address of the sole General Partner are Ben Karp, 1276 S.W. 113th Terrace, Pembroke Pines, Florida 33025.
- 5. The mailing address of the Partnership is Ben Karp, 1276 S.W. 113th Terrace, Pembroke Pines, Florida 33025.
  - 6. The latest date upon which the Partnership shall dissolve is December 31, 2048.

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.

GENERAL PARTNER:

Ben Karp

# STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this / st day of June, 1998, by Ben Karp, General Partner, and who is personally known to me or who produced the following as identification: kir Son ally

#00 660243

#00 660243

#00 660243

Print, type or stamp name of notary

AHAS

### ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

I hereby accept the appointment as the initial Registered Agent of The Ben Karp Family Limited Partnership as made in the foregoing Certificate of Limited Partnership.

Date June \_\_\_\_\_, 1998

Joanne M. Lord stun 3 500 BER 20, 2

98 JUL -6 PM 4: 25
SECRETARY OF STATE
TAIL WHASSEL ELOBIDA

#### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, Ben Karp, the sole General Partner of The Ben Karp Family Limited Partnership, a Florida Limited Partnership (the "Partnership") certifies that the total initial amount of capital contributions and anticipated capital contributions by the limited partners of the Partnership is \$ 1,000,000.00

FURTHER AFFIANT SAYETH NOT.

GENERAL PARTNER:

STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this Ben Karp, as General Partner, and who is personally known to me or who produced the following as identification: My somally

Notary Public

My Commission Expires:

Print, type or stamp name of notary

H.\Library\EPD\Karp\Imt part cert