

A98 0000 2035

MAYNARD ABRAMS
1916-1992

PAUL B. ANTON
1927-1981

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ABRAMS ANTON P.A.

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PLEASE REPLY TO:

FILE NO.: Hollywood
SCHA-0026

VIA FEDERAL EXPRESS #4812624375

August 28, 1998

Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

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-08/31/98--01060--012
****437.50 ****437.50

RE: AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD.

Dear Sir or Madam:

Enclosed for filing please find the following:

- A. An original and one Certificate of Limited Partnership for AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD.
- B. An original and one Affidavit of Capital Contribution for AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD.
- C. Our client's check in the amount of \$437.50 to cover the required filing fee

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98 AUG 31 PM 4: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please complete the necessary filing and return the certified copy to the undersigned in the self-addressed envelope I am providing for your convenience. Thank you for your prompt attention to this matter. Should you have any questions, please call.

Sincerely yours,

GENE K. GLASSER

GKG:crw/320589/Enclosures

cc: Mr. and Mrs. Aaron Schechter

A98-2035

Name	KGK
Availability	KGK
Document Examiner	KGK
Updater	KGK
Updater Verifier	KGK
Acknowledgment	KGK
W. P. Verifier	KGK

ESTABLISHED IN 1947

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TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP

OF

AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD.

a Florida Limited Partnership

The undersigned General Partner(s), desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership law, hereby states the following:

1. The name of the partnership is AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD.

2. The address of the office of the partnership is 2500 Hollywood Boulevard, Room 205, Hollywood, Florida 33020.

3. The name and address of the agent for service of process on the partnership is GENE K. GLASSER, c/o Abrams Anton P.A., 2021 Tyler Street, Hollywood, Florida 33022.

4. The name and business address of the General Partner(s) and the mailing address of the partnership are AARON SCHECTER and MARTHA S. SCHECTER, as tenants by the entirety, 2500 Hollywood Boulevard, Room 205, Hollywood, Florida 33020.

5. The latest date upon which the partnership shall dissolve is December 31, 2048.

6. No Limited Partner shall be entitled to withdraw or demand the return of any part of its capital contribution except upon dissolution of the partnership.

7. All annual net profits of the partnership shall be divided among the partners in the same proportions as the partners' then capital accounts unless retained for partnership investments and business activities.

8. There is no priority of any one (1) Limited Partner over another with respect to the contributions or compensation by way of income.

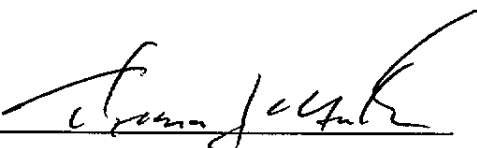
9. A Limited Partner may not demand property other than cash in return for its contributions.

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

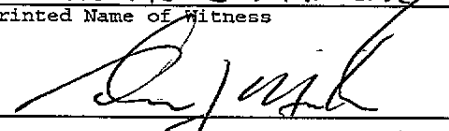
IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner(s) of AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD. this 24 day of August, 1998.

Witnesses:

GENERAL PARTNER(S):
AARON SCHECTER AND
MARTHA S. SCHECTER,
as tenants by the entirety


THOMAS J. MARKLEY
Printed Name of Witness

BY: 
AARON SCHECTER


THOMAS J. MARKLEY
Printed Name of Witness

BY: 
MARTHA S. SCHECTER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent for AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:



GENE K. GLASSER

#305247

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTION

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

BEFORE ME, the undersigned, personally appeared AARON SCHECTER and MARTHA S. SCHECTER, as tenants by the entirety, the General Partner(s) of AARON SCHECTER AND MARTHA S. SCHECTER FAMILY LTD., a Florida limited partnership, who, upon being duly sworn, certifies as follows:

The amount of capital contributions to the partnership made by all of the Limited Partners is as follows:

FIFTY THOUSAND (\$50,000.00) DOLLARS CASH.

The amount of additional capital contribution anticipated to be contributed by each Limited Partner is as follows:

-0-

FURTHER, AFFIANT SAYETH NAUGHT.

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.

GENERAL PARTNER(s):

AARON SCHECTER AND
MARTHA S. SCHECTER,
as tenants by the entirety

BY: *Aaron Schecter*
AARON SCHECTER

BY: *Martha S. Schecter*
MARTHA S. SCHECTER

The foregoing Affidavit was subscribed and acknowledged before me by AARON SCHECTER and MARTHA S. SCHECTER, who are personally known to me or who have produced _____ as identification, on this 24th day of August, 1998.

Thomas J. [Signature]
Notary Public, State of Florida

Massachusetts

My Commission Expires: 10-2-03

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TALLAHASSEE, FLORIDA