

# A99000000092

ENGELBERG, CANTOR, LEONE & MILGRIM, P. L.

A PROFESSIONAL LIMITED LIABILITY COMPANY

ATTORNEYS AT LAW

YANKEE CLIPPER CENTER

3230 STIRLING ROAD

HOLLYWOOD, FLORIDA 33021

HOLLYWOOD (954) 966-3900

FAX (954) 981-2300

MORRIS ENGELBERG &  
LAURIE E. MILGRIM, P.A.

JERALD C. CANTOR, P.A.

FREDERICK LEONE, JR., P.A.

PALM BEACH OFFICE

125 WORTH AVENUE

PALM BEACH, FLORIDA 33480

TELEPHONE (561) 734-0440

PLEASE DIRECT ALL MAIL  
TO HOLLYWOOD OFFICE

December 31, 1998

Division of Corporations  
State of Florida  
409 East Gaines Street  
Tallahassee, Florida 32399

200002729572--2

-01/04/99--01124--002

\*\*\*1837.50 \*\*\*1837.50

RE: Certificate of Limited  
Partnership of  
XOF Enterprises  
Limited Partnership

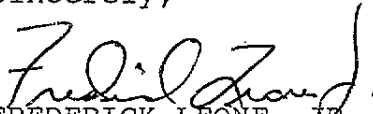
Dear Sir/Madam:

We have prepared and enclose herein two (2) originals of the Certificate of Limited Partnership of XOF Enterprises Limited Partnership. Please find a check in the amount of One Thousand Eight Hundred Thirty-Seven Dollars and 50/100 (\$1,837.50) made payable to the Secretary of State representing your fee for filing the aforementioned.

Kindly file the enclosed and return a certified copy of said document to our Hollywood offices.

If you have any questions with regard to the enclosed, please do not hesitate to contact our offices.

Sincerely,

  
FREDERICK LEONE, JR.

For the Firm

FL:nh  
Enclosures

|                   |  |
|-------------------|--|
| Name              |  |
| Availability      |  |
| Document Examiner |  |
| Updater           |  |
| Updater Verifier  |  |
| Acknowledgement   |  |
| P. Verifier       |  |

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
XOF ENTERPRISES  
LIMITED PARTNERSHIP**

**THE UNDERSIGNED SUBSCRIBER** to this Certificate of Limited Partnership, being a natural person, competent to contract pursuant to the provisions of Chapter 620, Florida Statutes, for the purpose of establishing a limited partnership, does hereby declare the following:

**ARTICLE I  
NAME**

The name of this limited partnership is the **XOF ENTERPRISES LIMITED PARTNERSHIP**.

**ARTICLE II  
GENERAL PARTNERS**

The general partners of the partnership, and their respective addresses, are as follows:

**ALICE FOX  
1370 BREAKERS WEST BOULEVARD  
WEST PALM BEACH, FL 33411**

**AF, INC. P98000108009  
1370 BREAKERS WEST BOULEVARD  
WEST PALM BEACH, FL 33411**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**ARTICLE III  
MAILING ADDRESS**

The principal office and mailing address of this limited partnership shall be **1370 BREAKERS WEST BOULEVARD, WEST PALM BEACH, FL 33411**.

**ARTICLE IV  
DATE OF DISSOLUTION**

The latest date on which this limited partnership may be dissolved shall be **December 31, 2047..**

**ARTICLE V  
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this limited partnership is **1370 BREAKERS WEST BOULEVARD, WEST PALM BEACH, FL 33411**, and the name of the initial registered agent of this limited partnership at that address is **ALICE FOX**.

**IN WITNESS WHEREOF**, the undersigned Subscribers have executed this Certificate of Limited Partnership of the **XOF ENTERPRISES LIMITED PARTNERSHIP** on the date shown below.


**DATED:** 12/20, 1998.

Fredrick Zane J.  
Nancy Murphy

  
**ALICE FOX**  
General Partner

**AF, INC.**  
General Partner

Fredrick Zane J.  
Nancy Murphy

By:   
**ALICE FOX**  
President

**CERTIFICATE OF DESIGNATION OF PLACE OF BUSINESS  
FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA  
AND FOR NAMING THE AGENT UPON WHOM PROCESS MAY BE SERVED**

In compliance with Section 48.091, Florida Statutes, the following is submitted:

That the **XOF ENTERPRISES LIMITED PARTNERSHIP** desiring to organize or qualify under the laws of the State of Florida, with its principal office and mailing address at **1370 BREAKERS WEST BOULEVARD, WEST PALM BEACH, FL 33411**, has named **ALICE FOX**, whose address is the same, as its agent to accept service of process within the State of Florida.



\_\_\_\_\_  
**ALICE FOX**  
General Partner

DATED: December 30, 1998

**HAVING BEEN NAMED** to accept service of process for the above-stated limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all Statutes relative to the proper and complete performance of my duties.



\_\_\_\_\_  
**ALICE FOX**

DATED: December 30, 1998

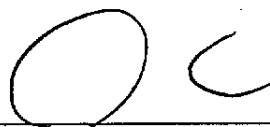
CAPITAL CONTRIBUTIONS AFFIDAVIT

STATE OF FLORIDA

COUNTY OF PALM BEACH

BEFORE ME, the undersigned individual, **ALICE FOX**, personally appeared, and, after being first duly sworn, deposed and stated as follows:

- (1) That she is the sole limited partner of the **XOF ENTERPRISES LIMITED PARTNERSHIP**.
- (2) That she has made an initial contribution as a limited partner in the amount of Ninety-Eight Dollars (\$98).
- (3) That the total anticipated limited partners' contributions is One Million Dollars (\$1,000,000).

  
\_\_\_\_\_  
**ALICE FOX**  
Limited Partner

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared **ALICE FOX**, the person described in the foregoing document as the "**Limited Partner**", and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid the 12th day of December 1998.

  
\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_



FREDERICK LEONE JR  
My Commission CC435951  
Expires Jan 30 1999  
Bonded by HAI  
800-422-1555

LAW OFFICES

ENGELBERG, CANTOR, LEONE & MILGRIM, P. L.