

A99000000683

http://ccfs.state.fl.us/scripts/efilcovr.exe

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H99000009354 4)))

27

CM

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

99 APR 27 AM 11:32

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

To:
Division of Corporations
Fax Number : (850) 922-4003

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 APR 27 PM 3:00

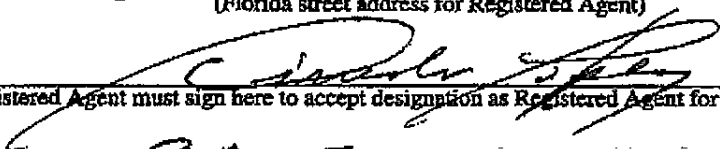
RECEIVED

FLORIDA LIMITED PARTNERSHIP

OFFLEX ONE LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$140.00

CERTIFICATE OF LIMITED PARTNERSHIP

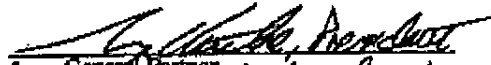
1. OFFLEX ONE LIMITED PARTNERSHIP
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 2911 GRAND AVE. #4A MIAMI, FL 33133
(Business address of Limited Partnership)
3. LINCOLN LOPEZ CPA
(Name of Registered Agent for Service of Process)
4. 2911 GRAND AVE. #4A MIAMI, FL 33133
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. SAME
(Mailing Address of the Limited Partnership)
7. The latest date upon which the Limited Partnership is to be dissolved is: 4/20/99
8. Name(s) of general partner(s): OFFLEX MANAGEMENT JOINT VENTURE Street address: 2911 GRAND AVE. #4A MIAMI, FL 33133

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 APR 27 AM 11:22

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 15th day of April, 19 99.

Signature of all general partners:

<u></u> General Partner <u>THE EAGLETON MARINE COMPANY, Manager</u> <u>OFFLEX PROPERTIES, LLC, Manager</u> General Partner <u>OFFLEX MANAGEMENT JOINT VENTURE,</u> <u>General Partner.</u> General Partner	<u>General Partner</u> <u>General Partner</u> <u>General Partner</u> <u>General Partner</u>
--	--

Prepared By: LINCOLN LOPEZ CPA
 2911 Grand Ave. #4A
 Miami, Florida 33133
 Phone# (305)-476-9350

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of OFFLEX ONE
LIMITED PARTNERSHIP
a Florida Limited Partnership, certify:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 APR 27 AM 11:32

The amount of capital contributions to date of the limited partners is \$ 100,000

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 2,000

Signed this 15th day of April, 19 99

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the
contents thereof and that the facts stated herein are true and correct.

[Signature]
The Eagleman Real Estate Company, Manager
OFFLEX Properties, L.L.C. Ventura

General Partner
OFFLEX Management Trust Ventures
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner