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Fax Number : (850) 922-4003

From: Account Name : GASSMAN & CONETTA, P.A.
Account Number : 075350000514
Phone : (813) 442-1200
Fax Number : (813) 443-5829

FLORIDA LIMITED PARTNERSHIP

LUVALA LIMITED PARTNERSHIP

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**CERTIFICATE OF LIMITED PARTNERSHIP OF
LUVALA LIMITED PARTNERSHIP**

THE UNDERSIGNED, desiring to form a Limited Partnership under the Florida Revised Uniform Limited Partnership Act, hereby certify as follows:

FIRST: The name of the Limited Partnership is **LUVALA LIMITED PARTNERSHIP**.

SECOND: The address of the office of the Partnership where the records will be maintained is 4625 N. Manhattan, Suite G, Tampa, FL 33614.

THIRD: The name and address of the agent for service of process is **ALAN S. GASSMAN**, 1245 Court Street, Suite 102, Clearwater, Florida 33756.

FOURTH: The names, business address and mailing address of each General Partner are as follows:

MORRIS BLUMENTHAL, JR.
4625 N. Manhattan, Suite G
Tampa, FL 33614

FIFTH: The mailing address of the Limited Partnership is 4625 N. Manhattan, Suite G, Tampa, FL 33614. The mailing address and the principal place of business address are the same.

SIXTH: The latest date on which the Limited Partnership is to dissolve May 17, 2049.

WE, the undersigned General Partners, declare under penalties of perjury that we have examined the foregoing and it is true, correct and complete.

DATED this 17th day of May, 1999.



MORRIS BLUMENTHAL, JR.
"General Partner"

(Signature of all General Partners required.)

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:ent 5-18-99

Alan S. Gassman, Esquire
1245 Court Street, Suite 102
Clearwater, FL 33756
(727) 442-1200
Florida Bar # 371750
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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

THE UNDERSIGNED, MORRIS BLUMENTHAL, JR. the General Partner of LUVALA LIMITED PARTNERSHIP, a Florida Limited Partnership being formed pursuant to Florida Statute § 620.108, does hereby, under penalty of perjury and to the best of the undersigned's knowledge and belief, declare as follows:

The amount of capital contribution of the Limited Partners and the amount anticipated to be contributed by the Limited Partners with respect to the Partnership is \$100.00.

FURTHER, Affiant sayeth not.

DATED this 17th day of May, 1999.



MORRIS BLUMENTHAL, JR.

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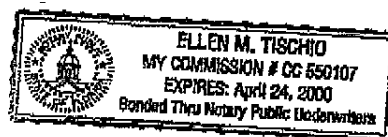
STATE OF FLORIDA)
COUNTY OF PINELLAS)

BEFORE ME, the undersigned authority, personally appeared MORRIS BLUMENTHAL, JR., who expressed that he executed the foregoing Affidavit for the purposes therein expressed.

WITNESS my official hand and seal this 18th day of May, 1999.


Notary Public

My Commission Expires:



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ACCEPTANCE OF REGISTERED AGENT

Pursuant to Florida Statute 48.091 and this Certificate of Limited Partnership, the undersigned Registered Agent does hereby accept the duties as Registered Agent and designates as his location for service of process as:

ALAN S. GASSMAN, ESQUIRE
1245 Court Street
Suite 102
Clearwater, Florida 33756

The undersigned shall serve as Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.



ALAN S. GASSMAN, ESQUIRE (SEAL)

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