

A99000001427

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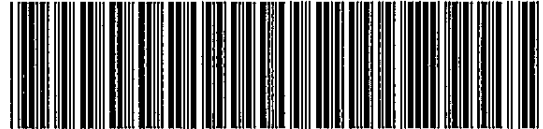
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TALLAHASSEE, FLORIDA

increasing contribution  
to \$10,000,000.00



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December 13, 2002

VIA FEDEX

Ms. Diane Cushing  
Florida Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

Re: Gordon Family Investments, Ltd.  
Document No.: A99000001427  
Our File No.: 23751-0002

Dear Ms. Cushing:

Pursuant to our recent telephone conversation, I am enclosing for processing the Supplemental Affidavit of Capital Contributions for Gordon Family Investments, Ltd., along with a check payable to the Florida Department of State in the amount of \$1,750.00, am also enclosing for your reference, a copy of the Limited Partnership Reinstatement for the Gordon Family Investments, Ltd., which was previously filed on or about December 5, 2002.

Please let me know if you have any questions or comments.

Sincerely,

BROAD AND CASSEL

Rose Parish-Ramon, Esq.

RPR:jsm  
Encls.

cc: Mr. Steven M. Gordon  
Robert A. Ryter, CPA

1. TAX	
FEES	1,750.00
2. FILING	
3. SERVICE	
4. OTHER	
5. TOTAL DUE	
6. PAID	

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR  
GORDON FAMILY INVESTMENTS, LTD.**

The undersigned, STEVEN M. GORDON, the sole General Partner of GORDON FAMILY INVESTMENTS, LTD., a Florida limited partnership, executed this supplemental affidavit, which is filed pursuant to section 620.112, Florida Statutes.

The total amount of the capital contributions of the limited partners is \$10,000,000.00

**FURTHER AFFIANT SAYETH NAUGHT.**

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

Dated this 13<sup>th</sup> day of December, 2002

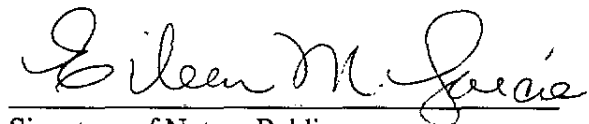
GENERAL PARTNER

  
STEVEN M. GORDON

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA                    )  
  ) SS:  
COUNTY OF MIAMI-DADE         )

The foregoing instrument was acknowledged before me this 13th day of December, 2002 by STEVEN M. GORDON, General Partner of the GORDON FAMILY INVESTMENTS, LTD., who is either personally known to me or has produced \_\_\_\_\_ as identification.



Signature of Notary Public  
Print Name EILEEN M. GARCIA  
State of Florida

My Commission Expires:

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