



THE UNITED STATES CORPORATION COMPANY

A99000001669

ACCOUNT NO. : 072100000032

REFERENCE : 409613 11758A

AUTHORIZATION :

Patricia Pignatelli

COST LIMIT : \$ 140.00

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 OCT 13 AM 9:47

ORDER DATE : October 12, 1999

ORDER TIME : 4:20 PM

ORDER NO. : 409613-005

300003013115--8

CUSTOMER NO: 11758A

CUSTOMER: Jeffrey S. Wachs, Esq  
DOUMAR ALLSWORTH CURTIS CROSS  
DOUMAR ALLSWORTH CURTIS CROSS  
1177 Southeast Third Avenue

Fort Lauderdale, FL 33316

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DOMESTIC FILING

NAME: THE LAURIE FAMILY LIMITED PARTNERSHIP

EFFECTIVE DATE:

6

XX ARTICLES OF INCORPORATION  
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

B/T  
10/13/99

CERTIFICATE OF LIMITED PARTNERSHIP

OF

THE LAURIE FAMILY LIMITED PARTNERSHIP

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THE UNDERSIGNED, constituting the General Partner of THE LAURIE FAMILY LIMITED PARTNERSHIP, a Florida Limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. Name of the Partnership: THE LAURIE FAMILY LIMITED PARTNERSHIP

2. The address of the office of the Partnership is.

12220 W. Broward Blvd.  
Plantation, FL 33325

3. Name and addresses of the agent for the service of process on the Partnership is.

JEFFREY S. WACHS, ESQ.  
1177 S.E. 3rd Avenue  
Fort Lauderdale, FL 33316

4. Name and business address of the General Partner is.

WILLIAM R. LAURIE  
12220 W. Broward Blvd.  
Plantation, FL 33325

5. Mailing address of the Partnership is.

THE LAURIE FAMILY  
LIMITED PARTNERSHIP  
c/o Mr. William R. Laurie  
General Partner  
12220 W. Broward Blvd.  
Plantation, FL 33325

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6. Latest date upon which the Partnership will dissolve.

Will be in accordance with Section 620.157  
of the Florida Statute, however, no later than  
December 31, 2049.

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

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership of THE LAURIE FAMILY LIMITED PARTNERSHIP, this 8<sup>th</sup> day October, 1999.

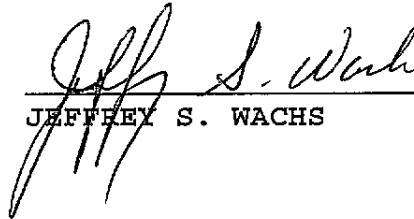
GENERAL PARTNER(S):

  
By: WILLIAM R. LAURIE

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for **THE LAURIE FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership agree to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:

  
\_\_\_\_\_  
JEFFREY S. WACHS

99 OCT 13 AM 9:47  
SECRETARY OF CORPORATIONS  
STATE OF FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared WILLIAM R. LAURIE, the General Partner of THE LAURIE FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, herein referred to as the "Partnership", who, upon being duly sworn, certified as follows:

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1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$5,000.00

2. The amount of capital contributions anticipated to be contributed by additional Limited Partners is as follows:


NONE

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

FURTHER AFFIANT SAYETH NOT.

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.

DATED this 8<sup>th</sup> day of October, 1999.

  
WILLIAM R. LAURIE

STATE OF FLORIDA )  
COUNTY OF BROWARD )

SS: \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me, the undersigned authority,  
by WILLIAM R. LAURIE, who appeared personally before me and took an  
oath, who is personally known to me or who produced \_\_\_\_\_  
as identification, on this 8<sup>th</sup>  
day of October, 1999.



Lisa D. Belenson  
Commission # CC 765902  
Expires AUG. 10, 2002  
BONDED THRU  
ATLANTIC BONDING CO., INC.

Lisa D Belenson

Notary Public, State of Florida

Print Name: Lisa D. Belenson

My Commission Number: CC 765902

My Commission Expires: 8/10/02

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