

Division of Corporations

A99000002008

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

From: Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850) 385-6735
Fax Number : (954) 583-4117

FLORIDA LIMITED PARTNERSHIP**KNIGHTSBRIDGE GROUP LTD.**

Certificate of Status	0
Certified Copy	1
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CERTIFICATE OF LIMITED PARTNERSHIP

1. Name of Limited Partnership (must contain a suffix such as "Limited", "Ltd." or "Limited Partnership");

KNIGHTSBRIDGE GROUP LTD.
a Florida Limited Partnership

2. Business Address of Limited Partnership

7000 W Palmetto Park Road
Suite 200
Boca Raton, FL 33433

3. Name of Registered Agent:

Steven Garellek

4. Address of Registered Agent:

7000 W Palmetto Park Road
Suite 200
Boca Raton, FL 33433

5. Signature of Resident Agent Accepting Designation:


Steven Garellek

6. Mailing Address of the Limited Partnership:

7000 W Palmetto Park Road
Suite 200
Boca Raton, FL 33433

7. The latest date upon which the Limited Partnership is to be dissolved:

December 31, 2039

8. Names and Addresses of General Partners:

Jeffrey Marc Applebaum
7000 W Palmetto Park Road
Suite 200
Boca Raton, FL 33433

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Under penalties of perjury I declare that I have read the foregoing and know the content thereof, and that the facts stated herein are true and correct.

Signed this 2nd day of Nov, 1999.

General Partner
Jeffrey Marc Applebaum


By: Jeffrey Marc Applebaum

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AFFIDAVIT

COUNTY OF PALM BEACH
STATE OF FLORIDA

Before me the undersigned authority, personally appeared Jeffrey Marc Applebaum, who being first duly sworn, on oath deposes and states:

The undersigned being the general partner of KNIGHTSBRIDGE GROUP LTD., a Florida Limited Partnership, certify:


1. The amount of capital contributions to date of the limited partners is \$100.00;
2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$250,000.00.
3. Affiant further states that he is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements made in an instrument of this nature. Affiant further certifies that he has read, or has heard read to him, the full facts of this Affidavit and understands its contents.

Dated this 29 day of November, 1999.

by:

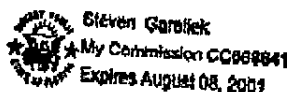

Jeffrey Marc Applebaum

SWORN TO, SUBSCRIBED AND ACKNOWLEDGED before me this ____ day of _____, 1999, by JEFFREY MARC APPLEBAUM who is personally known to me or produced _____ as identification.


Notary Public State of Florida

(seal)

My Commission Expires:



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TALLAHASSEE, FLORIDA

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