

CAPITAL CONNECTION, INC.
417 E. Virginia Street Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-344-8062 • Fax (850) 222-1212

A99000002122

FLA-ColCon Limited Partnership

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-12/17/99--01050--018
***1715.00 ***288.75

- 99 DEC 17 PM 3:39
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
- ☐ Art of Inc. File
 - ☒ LTD Partnership File *Cert*
 - ☐ Foreign Corp. File
 - ☐ L.C. File
 - ☐ Fictitious Name File
 - ☐ Trade/Service Mark
 - ☐ Merger File
 - ☐ Art. of Amend. File
 - ☐ RA Resignation
 - ☐ Dissolution / Withdrawal
 - ☐ Annual Report / Reinstatement
 - ☒ Cert. Copy *(X3)*
 - ☐ Photo Copy
 - ☒ Certificate of Good Standing *(X5)*
 - ☐ Certificate of Status
 - ☐ Certificate of Fictitious Name
 - ☐ Corp Record Search
 - ☐ Officer Search
 - ☐ Fictitious Search
 - ☐ Fictitious Owner Search
 - ☐ Vehicle Search
 - ☐ Driving Record
 - ☐ UCC 1 or 3 File
 - ☐ UCC 11 Search
 - ☐ UCC 11 Retrieval
 - ☐ Courier

NYC
12/17/99
Signature _____

Requested by: *CD*

Name _____

Date *12-17-99*

Time *11:00*

Walk-In _____

Will Pick Up _____

**CERTIFICATE OF LIMITED
PARTNERSHIP OF
FLA-COLCON LIMITED PARTNERSHIP**

The undersigned, desiring to form a limited partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act, hereby states the following:

1. Name of Limited Partnership. The name of the limited partnership is:

FLA-COLCON Limited Partnership
(the "Partnership")

2. Address of the Partnership. The office address of the Partnership is located at:

222 Lakeview Avenue, 17th Floor
West Palm Beach, FL 33401

3. Registered Agent and Office. The name and address of the registered agent of the Partnership for service of process pursuant to Section 620.105, Florida Statutes, are:

Regserv Corp.
222 Lakeview Avenue, 17th Floor
West Palm Beach, FL 33401

4. Name and Address of the General Partner. The name and address of the sole general partner of the Partnership are:

FLA-COLCON, Inc.
222 Lakeview Avenue, 17th Floor
West Palm Beach, FL 33401

5. Mailing Address of the Partnership. The mailing address of the Partnership is:

222 Lakeview Avenue, 17th Floor
West Palm Beach, FL 33401

6. Effective Date of Limited Partnership. The effective date of the Partnership shall be the date it is filed with the Secretary of State of Florida.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 DEC 17 PM 3:39

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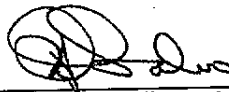
7. Dissolution of the Partnership. The latest date upon which the Partnership is to dissolve is December 31, 2099.

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

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership this 16 day of December, 1999.

FLA-COLCON, INC. a Florida corporation, Sole
General Partner

By:



Patrick J. DiSalvo, Vice President

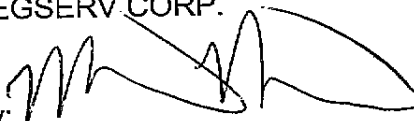
ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP, AT THE PLACE DESIGNATED IN NUMBER 3 OF THIS CERTIFICATE OF LIMITED PARTNERSHIP, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF ITS DUTIES.

Dated this 16th day of December, 1999.

REGSERV CORP.

By:



Mark Nussbaum, Vice President

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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BEFORE ME, the undersigned notary public, personally appeared Patrick J. DiSalvo, Vice President of FLA-COLCON, Inc., a Florida corporation, which is the sole general partner of FLA-COLCON Limited Partnership (the "Partnership"), whose business address is 222 Lakeview Avenue, 17th Floor, West Palm Beach, FL 33401, who, upon being duly sworn, certifies on behalf of the Partnership the following:

- FURTHER AFFIANT SAYETH NOT:

Dated: December 16, 1999.

Sworn to and subscribed before me this 16th day of December, 1999 by Patrick J. DiSalvo, as Vice President of FLA-COLCON, Inc., a Florida corporation, on behalf of the corporation. Personally known ✓ or produced _____ as identification.



(NOTAR

Sign: Jacqueline M. Ruggen
 Print: _____
 State of Florida at Large
 My commission expires: _____
 Serial Number, if any: _____