

A95000000132

WIN-26-05 THU 10:35

G Y V F & S P.A. MIAMI

FAX NO. 3053780010

P.01

1/25/95

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM

1:56 PM

((H95000001008))

ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: VALDES-FAUNT, BISCHOFF, KRIGG & MAND
2 S DISCAYNE BLVD
ONE DISCAYNE TOWER SUITE 3400
MIAMI FL 33131-34-0000
CONTACT: ROSA MARIA ANCHETA
PHONE: (305) 376-6037
FAX: (305) 376-6010

((H95000001008))

DOCUMENT TYPE: FLORIDA LIMITED PARTNERSHIP

NAME: BRIDGE GOVERNOR ASSOCIATES, LTD.
FAX AUDIT NUMBER: H95000001008
DATE REQUESTED: 01/25/1995
CERTIFIED COPIES: 1
NUMBER OF PAGES: 5
ESTIMATED CHARGE: \$148.75

CURRENT STATUS: REQUESTED
TIME REQUESTED: 13:56:06
CERTIFICATE OF STATUS: 1
METHOD OF DELIVERY: FAX
ACCOUNT NUMBER: 076077002561

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H95000001008))

** ENTER 'M' FOR MENU. **
ENTER SELECTION AND <CR>:

A95-132

MC

RECEIVED
01/25/95 11:05:55

TC
\$1,000.00

RECEIVED
01/25/95 11:05:55

8060 1953.479

FAX AUDIT NO.: H95000001008

CERTIFICATE OF LIMITED PARTNERSHIP
OF
BRIDGE GOVERNOR ASSOCIATES, LTD.

The undersigned, acting as organizer of a Limited Partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act hereby adopts the following certificate for such Limited Partnership:

1. The name of the Limited Partnership is BRIDGE GOVERNOR ASSOCIATES, LTD.

2. (a) The address of the office of the Partnership at which place the records shall be maintained is:

230 Fifth Street
Miami Beach, Florida 33139

(b) The name and address of the Partnership's agent for service of process is:

Valdes-Fauli Corporate Services, Inc.
c/o Gunster, Yoakley, Valdes-Fauli & Stewart, P.A.
34th Floor - One Biscayne Tower
2 S. Biscayne Blvd.
Miami, FL 33131

3. The name and address of the General Partner is:

BRIDGE GOVERNOR ASSOCIATES, INC. P95-6845
230 Fifth Street
Miami Beach, Florida 33139

THIS DOCUMENT PREPARED BY:
Mark J. Scheer, Esq.
Gunster, Yoakley, Valdes-Fauli &
Stewart, P.A.
34th Floor - One Biscayne Tower
2 S. Biscayne Blvd.
Miami, Florida 33131
Tel: (305) 376-6000
Florida Bar No.: 0710430

FAX AUDIT NO.: H95000001008

FAX AUDIT NO.: H95000001008

4. The mailing address for the Limited Partnership is:

230 Fifth Street
Miami Beach, Florida 33139

5. The term of the Partnership shall commence on the date of filing of this Certificate with the Secretary of State of Florida and shall continue until December 31, 2015, unless sooner terminated as provided in the Articles of Limited Partnership Agreement.

IN WITNESS WHEREOF, the undersigned General Partner has hereto executed this Certificate as of the 25th day of January, 1995.

GENERAL PARTNER:

BRIDGE GOVERNOR ASSOCIATES, INC.,
a Florida corporation

By: 
Mark J. Scheer
President

Attest: 
Mark J. Scheer
Secretary

[CORPORATE SEAL]

FAX AUDIT NO.: H95000001000

STATE OF FLORIDA

COUNTY OF DADE

The foregoing instrument was acknowledged before me this 25th day of January, 1995 by Mark J. Schoer as President and Secretary of BRIDGE GOVERNOR ASSOCIATES, INC., a Florida corporation, on behalf of the corporation, and ~~who~~ she is personally known to me or has produced _____ and _____, as identification and did/did not take an oath.

Rosa M. Ancienta

Print Name: ROSA M ANCIENTA
NOTARY PUBLIC
State of Florida



ROSA M ANCIENTA
My Commission DC421027
Expires Nov. 18, 1998
Divided by ANG
400-462-6678

My Commission Expires:

Having been named to accept service of process for the above stated Limited Partnership, at the place designated in this Certificate of Limited Partnership, I hereby act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

VALDES-PAULI CORPORATE SERVICES,
INC.

By: *[Signature]*
Mark J. Schoer, Esq.
Vice President

Dated: January 25, 1995

RECEIVED
JAN 28 1995
10:37 AM
FAX NO. 3053788010

FAX AUDIT NO.: H95000001008

A F F I D A V I T

STATE OF FLORIDA)
) : SS
COUNTY OF DADK)

BEFORE ME, a Notary Public, personally appeared Mark J. Scheer as President of BRIDGE GOVERNOR ASSOCIATES, INC. (the "Affiant"), who, after first being duly sworn, under oath, deposes and states that:

1. Affiant is the duly appointed Authorized Officer of BRIDGE GOVERNOR ASSOCIATES, INC., a Florida corporation (the "Corporation").

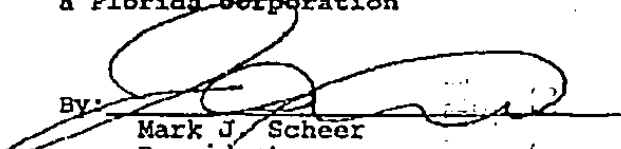
2. The Corporation is the General Partner of a Limited Partnership to be formed under the Florida Revised Uniform Limited Partnership Act under the name BRIDGE GOVERNOR ASSOCIATES, LTD.

3. The capital and anticipated contribution of the initial sole limited partner is \$ 1,000.

4. The Affiant 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 the full facts of this affidavit and understands its contents.

FURTHER AFFIANT SAYETH NAUGHT.

BRIDGE GOVERNOR ASSOCIATES, INC.,
a Florida corporation

By: 
Mark J. Scheer
President

FAX AUDIT NO.: H95000001008

STATE OF FLORIDA

COUNTY OF DADE

The foregoing instrument was acknowledged before me this 25th day of January, 1995 by Mark J. Scheer as President of BRIDGE GOVERNOR ASSOCIATES, INC., a Florida corporation, on behalf of the corporation, and who is personally known to me or has produced _____ as identification and did/did not take an oath.



ROSA M ANOGETA
My Commission CC# 7113
Expires Nov. 16, 1998
Banded by AAGJ
800-862-7676

Rosa M. Anoheta

Print Name: ROSA M. ANOGETA
NOTARY PUBLIC
State of Florida

My Commission Expires:

I:\FALSHAL\RA\BRIDGE.GOV\CERT.FP

RECEIVED
JAN 26 1995
11:38 AM

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE
OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED

1995 NOV 20 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

1. Name of Limited Partnership

1a. DOCUMENT #
A9500000132

BRIDGE GOVERNOR ASSOCIATES, LTD.

2. New Mailing Address, if Applicable

State, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, if Applicable

State, Apt. #, etc.

Mailing Address

200 FIFTH ST.
MIAMI BEACH FL 33139

Principal Office Address

200 FIFTH ST.
MIAMI BEACH FL 33139

If above addresses are entered in a way that through the incorrect information and enter correct address in Block 2 on Form 20

3. Date Formed or Registered in the State of
FLORIDA
01/26/1995

3a. Date of Last Report

4. State or Country of Formation
FL

City, State & Zip

5a. Capital Contributions as Shown
on Record
\$1,000.00

5b. Amount of Capital Contributions of
FLORIDA to date

6. FEI Number
65-0550882

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$0.75 Acknowledgment Fee (required
for a Certificate of Status)

8. FEES: 1.) Filing Fee - Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee - \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

**VALDES-FAULI CORPORATE SERVICES, INC.
GUNSTER, YOAKLEY, ET AL., 34TH FL.
ONE BISCAYNE TOWER, 2 S. BISCAYNE BLVD.
MIAMI FL 33131**

10. If changed, new Registered Agent Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.1052, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent or both to the State of Florida. Such change was authorized by its general partner(s). Thereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

BRIDGE GOVERNOR ASSOCIATES,

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

230 FIFTH ST.

11b. City, State & Zip Code

MIAMI BEACH FL 33139

11c. Registrar/
Document Number

P95000006845

**100001645701
-11/27/95--01062--020
***191.25 ***191.25**

CR2E003 (6/95)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(A) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify, that I am a General Partner of the limited partnership, receiver or trustee empowered to file this report as required by Section 620.102, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Craig Robin

Telephone Number

**11/18/95
331-8767**