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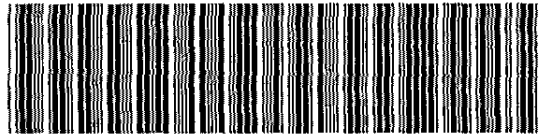
(Business Entity Name)

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04 JUN 21 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Gabor Limited Partnership

Filing Evidence

- Plain/Confirmation Copy
- Certified Copy

Retrieval Request

- Photocopy
- Certified Copy

Type of Document

- Certificate of Status
- Certificate of Good Standing
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

X LP

**CERTIFICATE OF LIMITED PARTNERSHIP OF THE
GABOR LIMITED PARTNERSHIP
A FLORIDA LIMITED PARTNERSHIP**

FILED
04 JUN 21 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned Officer of the General Partner desiring to form a partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is GABOR LIMITED PARTNERSHIP.
2. The address of the office of the Partnership is 1111 Kane Concourse, Suite 504, Bay Harbor Islands, Florida 33154.
3. The address of the agent for service of process of the Partnership is: Rozencwaig & Ferrero-Carr, 301 West Hallandale Beach Boulevard, Hallandale Beach, Florida 33009 and the name of the initial registered agent is Leslie Alan Rozencwaig, Esq. LU4 000041835
4. The name and business address of the General Partner are Gabor Holdings LLC, 1111 Kane Concourse, Suite 504, Bay Harbor Islands, Florida 33154.
5. The mailing address of the Partnership is: 1111 Kane Concourse, Suite 504, Bay Harbor Islands, Florida 33154.
6. The latest date upon which the Partnership shall dissolve is no later than December 31, 2054, unless the Partners agree to extend the term.


This Certificate is duly executed and is being filed in accordance with section 620.108 of the Florida Revised Uniform Limited Partnership Act (1986).

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

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by Andrew G. Kovacs, Manager of Gabor Holdings, LLC, the General Partner of Gabor Limited Partnership, this 16th day of June, 2004.

GABOR LIMITED PARTNERSHIP

By: _____


Andrew G. Kovacs, Manager of
Gabor Holdings LLC, General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA)
)
COUNTY OF BROWARD)

BEFORE ME, the undersigned, the Manager of the general partner of Gabor Limited Partnership, a Florida Limited Partnership, certifies as follows:

The amount contributed and anticipated to be contributed by the limited partners at this time totals Six Hundred Thousand Dollars (\$600,000).

This 16th day of June, 2004.

FURTHER AFFIANT SAYETH NAUGHT.

Under the 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.

GABOR LIMITED PARTNERSHIP

By: *Andrew G. Kovacs*
Andrew G. Kovacs, Manager of
Gabor Holdings LLC, General Partner

STATE OF FLORIDA)
)ss:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this 16th day of June, 2004, before me, an officer duly qualified to take acknowledgments, personally appeared Andrew G. Kovacs, who is personally known to me or who has produced FLA # K120-007-48-263-0 (type of identification) and has acknowledged before me that he executed the foregoing freely and voluntarily for the purpose therein expressed, who did take an oath.

Niurka Steinman
NOTARY PUBLIC, State of Florida

My Commission Expires:



ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for GABOR LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of the registered agent.

ROZENCWAIG & FERRERO-CARR

By:


LESLIE ALAN ROZENCWAIG, ESQ