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PAUL SALVER BOOK

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From: Account Name : PAUL SALVER, P.A.  
Account Number : I20020000087  
Phone : (954)389-1333  
Fax Number : (954)389-1397

FLORIDA LIMITED PARTNERSHIP

AM Transcription, Ltd.

Certificate of Status	1
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Florida Dept of State

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

September 27, 2005

AM TRANSCRIPTION, LTD.  
7150 W. 20TH AVENUE, SUITE 412  
MIRALAH, FL 33016

SUBJECT: AM TRANSCRIPTION, LTD.  
REF: W05000044405

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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### CERTIFICATE OF LIMITED PARTNERSHIP

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

2. 7150 W. 20th Avenue, Suite 412, Hialeah, FL 33016  
(Business address of Limited Partnership)

3. Paul Salver, P.A.  
(Name of Registered Agent for Service of Process)

4. 2721 Executive Park Drive, Suite 3, Weston, FL 33331  
(Florida street address for Registered Agent)

5. *Paul Salver*  
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. \_\_\_\_\_  
7150 W. 20th Avenue, Suite 412, Hialeah, FL 33016  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is 12/31/2045.

8. Name(s) of general partner(s): AM Transcription of Florida, Inc.  
POS 000130538

Street address: 7150 W. 20th Ave., Suite 412  
Hialeah, FL 33016

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

X Signed this 26<sup>th</sup> day of September, 2005

Signature of all general partners:  
*[Signature]*  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR FLORIDA LIMITED PARTNERSHIP**

*The undersigned constituting all of the general partners of  
AM Transcription, Ltd.*

*a Florida Limited Partnership, certify:*

The amount of capital contributions to date of the limited partners is \$ 100,000

The total amount contributed and anticipated to be contributed by the limited partners at this time  
totals \$ 50,000

X Signed this 26<sup>th</sup> day of September, 2005

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the  
contents thereof and that the facts stated herein are true and correct.*

X   
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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