

CCRS  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILE 2<sup>ND</sup>

# A 01000000531

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: CINDY HICKS  
DATE: 4-19-01  
REF. #: 0174.15526  
CORP. NAME: WOODMERE HOLDINGS, L.L.C.

01 APR 19 PM 3:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ARTICLES OF INCORPORATION       ARTICLES OF AMENDMENT       ARTICLES OF DISSOLUTION
- ANNUAL REPORT       TRADEMARK/SERVICE MARK       FICTITIOUS NAME
- FOREIGN QUALIFICATION       LIMITED PARTNERSHIP       LIMITED LIABILITY
- REINSTATEMENT       MERGER       WITHDRAWAL
- CERTIFICATE OF CANCELLATION       UCC-1       UCC-3

OTHER: STATEMENT OF QUALIFICATION

STATE FEES PREPAID WITH CHECK# 15579 FOR \$ 77.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: 200004033172--8  
-04/19/01--01057--019  
\*\*\*\*\*77.50 \*\*\*\*\*77.50

COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- CERTIFIED COPY       CERTIFICATE OF GOOD STANDING
- CERTIFICATE OF STATUS

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2001 APR 19 10:46  
NOT RECORDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

Examiner's Initials

LP - 25.00  
CERT 52.50

3/16/01

#11590-1

STATEMENT OF QUALIFICATION FOR  
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership as identified in the records of the Florida Department of State:  
WOODMERE HOLDINGS, LTD.

However, the name the limited partnership shall use: WOODMERE HOLDINGS, L.L.L.P.  
Insert limited partnership's Florida document number: A0100000531

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: L.L.L.P.  
(LLLP, L.L.L.P.)

3. The street address of its chief executive office:  
(if different from current recorded address):

4. The street address of principal office in Florida:  
(if different from above)

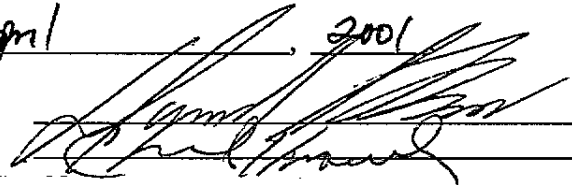
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TALLAHASSEE, FLORIDA

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:  
 as of the date this document is filed with the Florida Secretary of State  
or  
 a date later than the time of filing:

7. The name and Florida street address of the partnership's agent for service of process:  
Charles Knowles  
4034 Roberts Point Road  
Sarasota, Florida 34242

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 18 day of April, 2001  
Signature of TWO Partners: 

Typed or printed names of partners signing above: David S. Band  
Charles Knowles, President of  
Venture Net, Inc., a Florida corp.

Filing Fee: \$25.00  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75