Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000188872 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

GAIL S. ANDRE

LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number: 072720000036

Phone : (407)843-4600 Fax Number : (407)843-4444

PLEASE ARRANGE FILING OF THE ATTACHED STATEMENT OF QUALIFICATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER. PLEASE FILE THIS DOCUMENT AS "HARROD-BLAUVELT-OKUN PARTNERS,

LIMITED PARTNERSHIP AMENDMENT

RECEIVED

OZ AUG 30 MM 7: 42

IVISION OF CORPORATION

| Certificate of Status | 0 |
|-----------------------|-----------|
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$1.95.00 |
| | 120 |

Electronic Filing Menu.

Corporate Filing

Rublic Access Help

H02000188872 4

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: | | |
|--|------------------|-----------------|
| HARROD-BLAUVELT-OKUN PARTNERS, LTD. | | |
| Insert limited partnership's Florida document number: #02000 \180 | . | - - |
| Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees. | 02 i | |
| 2. Suffix adopted for the above named partnership: L.L.L.P. | 言 | |
| 3. The street address of its chief executive office: c/o Harrod Properties, Inc. | · ~ | |
| (if different from current recorded address): 777 South Harbour Island Bouleyard | | O |
| Suite 877, Tampa, Florida 33602 | က် | |
| 4. The street address of principal office in Florida: (if different from above) | <u></u> | F |
| 6. The effective date of this filing shall be: X 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: Gary W. Harrod | | , - |
| c/o Harrod Properties, Inc 777 South Harbour Island Boulevard | | |
| | | |
| 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 29th day of August 2002 HARRON-BLADYKLT-OKUM FUND GP, FLC: a Florida limited II | >%41 √ | |
| AND HANDER OF TAKES POTENTIES TO A COMPANY OF THE SAME | epany | , |
| Typed or printed names of partners signing above: | • | . ; |

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

INHS65(1/00)