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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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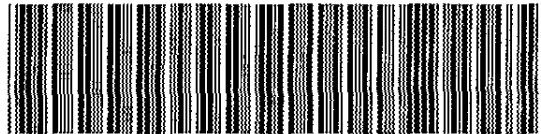
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2003 MAY 13 AM 8:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAY 15 2003

MARK J. NOWICKI

LAWYER

LOGGERHEAD PLAZA, SUITE 210

14155 U.S. HIGHWAY ONE

JUNO BEACH, FL 33408-1431

MARK J. NOWICKI
ALSO ADMITTED IN COLORADO
AND MONTANA

OF COUNSEL
KENNEDY & ASSOCIATES, P.L.

TELEPHONE 561 624-1444
TELEFAX 561 630-4425
EMAIL: mnowickiesq@aol.com

May 2, 2003

BOARD CERTIFIED IN TAXATION
PRACTICE LIMITED TO
ESTATE PLANNING,
INCOME TAX PLANNING AND
RELATED FEDERAL TAX MATTERS

Florida Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Maxwell Aerospace Holdings, Ltd.; Statement of Qualification and Name Change to Maxwell Aerospace Holdings, LLLP

Dear Madam:

I enclose an original Statement of Qualification for Florida Limited Liability Limited Partnership for Maxwell Aerospace Holdings, Ltd. for filing by the Secretary of State. Also enclosed, you will find my check in the amount of \$86.25 covering filing fees as follows:

1.	Filing fee	\$25.00
2.	Certified copy	\$52.50
3.	Certificate of Status	<u>\$8.75</u>
	Total	\$86.25

If you have any questions, please contact me directly. Thank you for your attention to this matter.

Sincerely,



Mark J. Nowicki

MJN/dmg

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TALLAHASSEE, FLORIDA

**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: Maxwell Aerospace Holdings, Ltd.

The limited partnership's Florida document number is A02000001353.

2. The suffix adopted for the above named partnership is LLLP.
3. After qualification, the name of the partnership shall be: Maxwell Aerospace Holdings, LLLP.
4. The street address of its chief executive office is 2310 NW 55th Court, Bay 128, Fort Lauderdale, FL 33309.
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.
7. The name and Florida address of the partnership's agent for service of process is:

Mark J. Nowicki, Esquire
14155 U.S. Highway One, Suite 210
Juno Beach, FL 33408

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

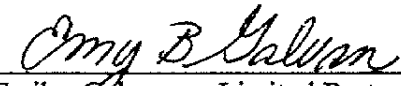
Signed this 20 day of February, 2003.

By: 

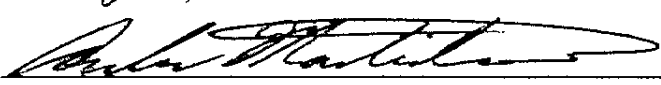
Marta E. Maxwell, as General and Limited Partner

By: 

H. George Maxwell, as General and Limited Partner

By: 

Emilse Galvan, as Limited Partner

By: 

Andrew Montidoro, as Limited Partner

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