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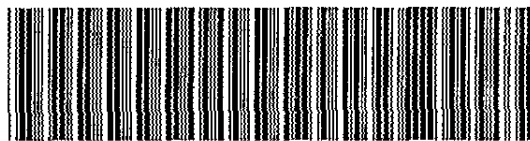
(Business Entity Name)

(Document Number)

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JAN 14 2003

JB
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**STATE 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: Legacy Park Venture, L.L.L.P.

Insert limited partnership's Florida document number: _____
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: c/o Avanti Properties Group
(if different from current recorded address): 431 E. Horatio Avenue
Maitland, FL 32751

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

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

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:

Avanti Properties Group, 431 E. Horatio Avenue, Maitland, FL 32751

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 13th day of January, 2003.

Signature of TWO Partners: _____

See attached Signature Page

Typed or printed names of partners signing above: Legacy Park (Orlando) AIP IV, L.L.L.P.

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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