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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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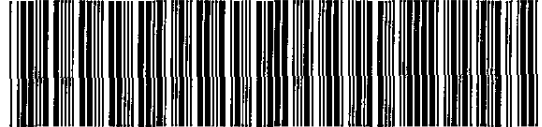
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FILE 2ND

GRAY, HARRIS & ROBINSON, P.A.
SUITE 600
301 SOUTH BRONOUGH ST. (32301
P.O. BOX 11189
TALLAHASSEE, FLORIDA 32302-318
TEL 850-222-7717
TEL 850-577-9090
FAX 850-222-3494
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GRAYHARRIS
ATTORNEYS AT LAW

January 29, 2003

E-MAIL ADDRESS

Division of Corporations
George Firestone Building
409 East Gaines Street
Tallahassee, FL 32301

Via Hand Delivery

To Whom It May Concern:

Enclosed for filing, please find the **STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**, along with a check for the applicable filing fees and fees to obtain **TWO (2) CERTIFIED** copies of **STATEMENT** for the following entity:

NEW BROAD STREET I, LTD., LLLP

Upon receipt, please "date-stamp" the copy of the letter provided and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Very truly yours,



Jill W. May, Paralegal

/jwm
Enclosures

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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:

New Broad Street I, Ltd., LLLP

Insert partnership's Florida registration 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: _____ **LLLP**
(LLL, L.L.L.P.)

3. The street address of its chief executive office: 250 South Park Avenue, Suite 630
(if different from current recorded address): Winter Park, Florida 32789

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

5. The name and Florida street address of the partnership's agent for service of process:
W.P. Battaglia
250 South Park Avenue, Suite 630
Winter Park, Florida 32789

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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6. This partnership hereby elects to be a limited liability partnership.

7. 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: _____

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 28th day of January, 2003.

EPIL New Broad Street GP, LLC
General Partner

W.P. Battaglia
W.P. Battaglia, Manager

INHIS67(1/00) Filing Fee: \$25.00
 Certified copy: \$52.50 (optional)
 Certificate of Status: \$ 8.75 (optional)