A05000001909

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2005 OCT 14 AM 9:48
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Florida Department of State
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Account Number : 075410002172
Phone : (239)344-1100
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LIMITED PARTNERSHIP AMENDMENT

SIX L'S WEST LIMITED

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$105.00

$77.50

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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. The name of the limited partnership as identified in the records of the Florida Department of State:
SIX L'S WEST LIMITED

Insert limited partnership's Florida document number: A05000001909
or
Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:
SIX L'S WEST, LLLP
(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 315 EAST NEW MARKET ROAD
(if different from current recorded address): IMMOKALEE, FL. 34142

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:
☑ 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:
MAXWELL L. PRESS
315 EAST NEW MARKET ROAD
IMMOKALEE, Florida 34142

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 12th day of October 2005.

Signature of TWO Partners:

Typed or printed names of partners signing above: Maxwell L. Press, Pres. of
SLW-GP, LLC, Sole Gen. Ptnr.

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

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