

A9900000 1985

AMERILAWYER®

(Requestor's Name)

343 ALMERIA AVENUE

(Address)

CORAL GABLES, FL 33134 - (305) 445-2700

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

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-02/15/00-01075-010

*****25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 FEB 15 PM 3:02

FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. WFOI of San Francisco wireless Partners, LLP
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
- Mail out Will wait Photocopy Certificate of Status

A99-1985
Q2-5

[Handwritten signatures and stamps]

NEW FILINGS	
Profit	
NonProfit	
Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	

RECEIVED
00 FEB 15 AM 11:35
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**STATEMENT OF QUALIFICATION FOR FLORIDA OR FOREIGN
LIMITED LIABILITY PARTNERSHIP**

1. The name of the partnership as identified in the records of the Florida Department of State:
WPOI OF SAN FRANCISCO WIRELESS PARTNERS, L.L.P.

Insert partnership's Florida registration number: A99000001985

or

Attach completed Partnership Registration Statement and \$50 filing fee.

2. Suffix adopted for the above named partnership: L.L.P.
("Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP")

3. The street address of its chief executive office: 11000 Prosperity Farms Road
(if different from current recorded address): Suite 201
Palm Beach Gardens, Florida 33410

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

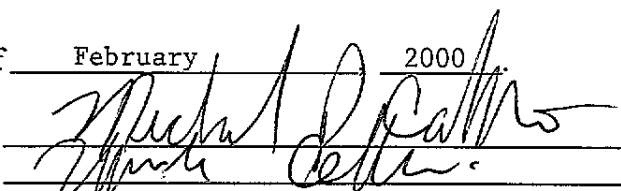
5. The name and Florida street address of the partnership's agent for service of process:
Spiegel & Utrera, P.A.
343 Almeria Avenue
Coral Gables, Florida 33134

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 _____ day of February 2000

Signature of TWO Partners: _____


Typed or printed names of partners signing above: Michael D. Calandra
William Cella

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TALLAHASSEE, FLORIDA

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