

Michael A. Pyle, P.A.

Requester's Name

1265 W. Granada Blvd. Ste 1

Address

Ormond Beach, FL 32174

City/State/Zip

Phone #

A00000000538

Office Use Only

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR 21 PM 1:56

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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-02/25/00--01008--002

*****77.50 *****25.00

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

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Examiner
☐ Fictitious Name
Updater
Under
Verifier
Acknowledgement
P. Verifier

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

**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:

Mombasa Trading Partnership, LLP

Insert limited partnership's Florida document number: A00000000538

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
(LLLP, L.LLP.)

3. The street address of its chief executive office: 108 Riverside Drive
(if different from current recorded address): Ormond Beach, FL 32176-6502

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:

xx 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:

Humayun Jamidar

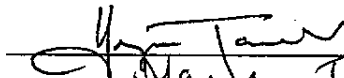
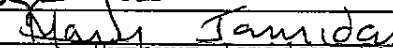
108 Riverside Drive

Ormond Beach, Florida 32176-6502

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 3rd day of February, 2000.

Signature of TWO Partners:

Typed or printed names of partners signing above:

Humayun Jamidar, Sole General Partner;
Humayun Jamidar Revocable Trust dated 2/3/00
Humayun Jamidar, Trustee, Limited Partner; and,
Mary Jamidar Revocable Trust dated 2/3/00 by
Mary Jamidar, Trustee, Limited Partner

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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