Al	DEPARTMENT OF STATE ACCOUNT FILING COVER SH	
Account Number Reference: (Sub Account) Date: Requestor Name: Address: Telephone: Contact Name: Corporation Name:	FCA000000017 4-13-00 Carlton Fields Post Office Box 190 Tallahassee, Florida 32302 (850) 224-1585 Maelene Tyson (269) Cheryl Igler (252)	DO APR 13 PH S: LATE PH S: L'OPE STATE PH S: L'OPE STATE S: L'OPE STATE PH S: L'OPE STATE S: L'O
Entity Number (if appl Authorization:	Windmere, LLP	
Certified Copy (1-§ New Filings Fictitious Name	<ul> <li>UCC'S</li> <li>Plain Stamped Copy</li> <li>Amendments</li> </ul>	Certificate of Status Annual Report Registration
<ul> <li>( ) Call When Ready</li> <li>( X ) Walk In</li> <li>( ) Mail Out</li> </ul>	(X)Call if Problem ()Will Wait	<ul><li>( ) After 4:30</li><li>( ) Pick Up</li></ul>
CF Internal Use Only Client: <u>399666</u> Matter: TAL#501656.01	97552	

## STATEMENT OF QUALIFICATION

The undersigned Florida limited partnership desiring to become a limited liability limited partnership hereby files this Statement of Qualification and says:

(a) The name of the Partnership is FLORIDA TITLE AFFILIATES OF WINDERMERE, L.L.P.; Its Florida Document number is A0000000642.

(b) The street address of the Partnership's chief executive office and the street address of its principal office in this state is: 718 Garden Plaza, Orlando, Fl 32803;

(c) The name and street address of the Partnership's agent for service of process is:

Stewart Title Guaranty Company Attention: Harold Hickman 3401 West Cypress Street Tampa, Florida 33607

(d) The partnership elects to be a limited liability limited partnership.

Dated this 12 day of april, 2000.

## FLORIDA TITLE AFFILIATES OF WINDERMERE, L.L.P.

By: Stewart Title of Orange County, Inc., its sole general partner

00 APR 13 PH 3:1

By its Chairman of the Board