

A00000001176

H. HENRY PHELPS
651 DUNDEE CIRCLE
WEST MELBOURNE, FL 32904
Home 321-725-6612
Office 321-784-1893

July 8th, 2000

FILED
NO JUL 21 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Florida Department of State
P. O. Box 6327
Tallahassee, Florida 32314

500003337685--1
-07/14/00--01077--002
*****25.00

SUBJECT: COPIES OF LETTERS ATTACHED

I have returned the statement of qualification for each partnership and
checks for \$25.00 for each one

Thank you for your help.

Yours truly,

H. Henry Phelps
H. Henry Phelps

A00-1176
7-21

\$25.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 28, 2000

H. HENRY PHELPS
651 DUNDEE CIRCLE
MELBOURNE, FL 32904

SUBJECT: H.H. FAMILY TREE FARM
Ref. Number: W00000013371

FILED
00 JUL 21 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for H.H. FAMILY TREE FARM and your check(s) totaling \$612.50. However, the document has not been filed and is being retained in this office for the following:

The statement of qualification must be filled out in order for it to be filed with us . Please complete the application and return it with the \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 700A00036523

**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:
H. HENRY PHELPS FAMILY LIMITED PARTNERSHIP, LIMITED

Insert limited partnership's Florida document number:
or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees. (Attached)

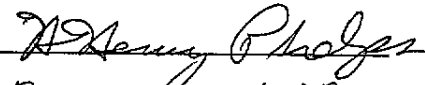
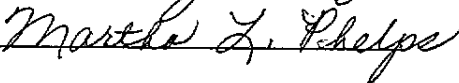
2. Suffix adopted for the above named partnership: **LIMITED**
(LLLP, L.L.L.P.)
3. The street address of its chief executive office: (if different from current recorded address):
**651 Dundee Circle
Melbourne, Florida 32904**
4. The street address of principal office in Florida: (if different from above)
SAME AS ABOVE
5. The limited partnership hereby elects to be a limited liability limited partnership.
6. The effective date of this filing shall be:
**YES 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:
**H. HENRY PHELPS
651 DUNDEE CIRCLE
MELBOURNE, FLORIDA 32904**

FILED
00 JUL 21 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 8TH day of July, 2000

Signature of TWO Partners:

Typed or printed names of partners signing above:

H. Henry Phelps
Martha L. Phelps

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