CCRS
105 N. MERIDIAN STREET, POWER LEVEL
TALLAHASSEE, FL 32301
222-1173

$33.75

FILE 2ND

A01000000530

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

300004033203--0
-04/19/01--01067--025
***1818.75 *****33.75

DATE: 4-19-01

REF. #: 0672.15529

CORP. NAME: WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP, LLP

FILED
01 APR 19 PM 2:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

| | | |
|---|---|---|
| ( ) ARTICLES OF INCORPORATION | ( ) ARTICLES OF AMENDMENT | ( ) ARTICLES OF DISSOLUTION |
| ( ) ANNUAL REPORT | ( ) TRADEMARK/SERVICE MARK | ( ) FICTITIOUS NAME |
| ( ) FOREIGN QUALIFICATION | ( ) LIMITED PARTNERSHIP | ( ) LIMITED LIABILITY |
| ( ) REINSTATEMENT | ( ) MERGER | ( ) WITHDRAWAL |
| ( ) CERTIFICATE OF CANCELLATION | ( ) UCC-1 | ( ) UCC-3 |

(X) OTHER: STATEMENT OF QUALIFICATION - LLP

STATE FEES PREPAID WITH CHECK# 1595 FOR $ 1818.75
(33.75 FOR THIS FILING)

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: $

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 APR 19 AM 10:15
NOT ISSUED AS
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

PLEASE RETURN:

( ) CERTIFIED COPY ( ) CERTIFICATE OF GOOD STANDING (X) PLAIN STAMPED COPY

(X) CERTIFICATE OF STATUS

Examiner's Initials LP - 25
CERT 8.75

BR
4/19

# 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: William F. Sutton Family Limited Partnership

   Insert limited partnership's Florida document number: A01000000530
   or
   Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

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

2.5 Name of Partnership after filing this statement: William F. Sutton Family Limited Partnership, LLP

3. The street address of its chief executive office: N/A
   (if different from current recorded address)

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

FILED
01 APR 19 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. 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: _____.

7. The name and Florida street address of the partnership's agent for service of process:
   Helen C. Sutton
   16605 Avila Blvd.
   Tampa, Florida 33612

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 5th day of ~~March~~ April, 2001.

Signature of TWO Partners: Helen C. Sutton

William F. Sutton

Typed or printed names of partners signing above: Helen C. Sutton

William F. Sutton, Jr.

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