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INC. P.O. Box 37066 (32315-76	066) ~ (850) 222-2666 or (800	969-1666 . Fax (850) 222-1666
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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 State: PANTHERS HOCKEY, LTD.
Insert limited partnership's Florida document number: AUTOUUDOO 618 Attach certificate of limited partnership, affidavit of capital contributions and applicable limited. Thereship filing fees.
2. Suffix adopted for the above named partnership: (LLLP, L.L.L.P.)
3. The street address of its chief executive office: c/o Zack Kosnitzky, P.A. (if different from current recorded address): 100 S.E. 2nd Street, 28th Floor Miami, FL 33131
4. The street address of principal office in Florida: (Same as Above) (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: KTG&S Registered Agent Corp. 100 S.E. 2nd Street, 28th Floor Miami , Florida 33131
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 2nd day of May 1. Signature of TWO Partners: 1. 2.
Typed or printed names of partners signing above 1. <u>Alan P. Cohen, as Member of Panthers Hockey LC 2. Alan P. Cohen, as limited partner of Panthers Hockey, Ltd.</u>

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