CORPORATE ACCESS, INC.	70 323 770 (850, 222-26	66 or (800) 969-1666 Fax (850) 222-1666
CERTIFIED COPY	WALK IN PICK UP WITO I	FILED PH 3.2 SECTION OF STATEMENT OF STATEME
	n n	Statement of gual. A
(CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #)	Partnership, L	11. 3000043404133 -06/04/0101121004 ***1258.75 *****25.00
(CORPORATE NAME & DOCUMENT#)		
(CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #)	88	OT JUN -1 AM IO: 03 VISION CH CHREGRATION
ECIAL INSTRUCTIONS		0.03 0.03

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:

THE 125 FAMILY PARTNERSHIP, LTD.

A01000000163 Insert limited partnership's Florida document number:

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

- 2. Suffix adopted for the above named partnership: L.L.L.P. (omit "Ltd."
- 3. The street address of its chief executive office:

125 Coastline Road, Suite 2000, Sanford, Florida 32771

- 4. The street address of principal office in Florida: Same
- 5. The limited partnership hereby elects to be a limited liability limited partnership.
- 6. The effective date of this filing shall be: as the date this document is filed with the Florida Secretary of State or a date later than the time of filing:
- 4. The name and Florida street address of the partnership's agent for service of process:

David B. Brewer, 125 Coastline Road, Suite 2000, Sanford, Florida 32771

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signature of Two Partners:

BREWER OPERATING COMPANY, LLC

Limited Partner

Husband and Wife as tenants by the entirety