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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**Office Use Only**

**A 01000001547**

Return Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Phone # \_\_\_\_\_

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Alliance-Landbank  
(Corporation Name) (Document #)
2. Development, Ltd LLC  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. Feb 3rd  
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time \_\_\_\_\_  
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certified Copy  
☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☒ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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 -11/26/01--01019--001  
 \*\*\*\*322.50 \*\*\*\*\*86.25

**Examiner's Initials**

8625

**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:  
ALLIANCE-LANDBANK DEVELOPMENT, LTD.

Insert limited partnership's Florida document number: A01000001547

or

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

2. Suffix adopted for the above named partnership: LLLP  
(LLLP, L.L.L.P.)

3. The street address of its chief executive office: 8725 N.W. 18<sup>th</sup> Terrace, Suite 206  
Miami, Florida 33172  
(if different from current recorded address): \_\_\_\_\_

4. The street address of principal office in Florida: \_\_\_\_\_  
(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:  
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:  
Ernesto Cambo  
8725 N.W. 18<sup>th</sup> Terrace, Suite 206  
Miami, Florida 33172

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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 21 day of November, 2001.

Signature of TWO Partners: \_\_\_\_\_

Typed or printed names of partners signing above: \_\_\_\_\_

Ernesto Cambo, Limited Partner  
A. L. Development, Inc., General Partner  
By: Ernesto Cambo, President

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