Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: CAUTHEN AND FELDMAN, P.A. Account Name

Account Number : I19980000085 : (352)343-2225 Fax Number : (352)343-7759

LIMITED PARTNERSHIP AMENDMENT

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

AuditNo. H02000138872 5

STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

The name of the limited partnership as identified HHR VENTURES, LLLP	1 in the records of the Florida Departm	ient of S	itate:
Insert limited partnership's Florida document numb			•
Attach certificate of limited partnership, affidavit of partnership filing fees.	r capital contributions and applicable l	imited	
2. Suffix adopted for the above named partnership: (LLLP,	LLLP.)	÷	<u></u>
3. The street address of its chief executive office:	Same	7 -	
4. The street address of principal office in Florida: (if different from above)	Same		
5. The limited partnership hereby elects to be a lim	ited liability limited partnership.		
 6. The effective date of this filing shall be: X as of the date this document is filed with or a date later than the time of filing: 	n the Florida Secretary of State	TARIAGE LAND	S1 AWV 20
7. The name and Florida street address of the parts Ann Huffstetler Rou	ership's agent for service of process:	ARY G	57 E
2000 Country Club Drive	Florida 32726	<u></u>	ন্ত
	,Florida 32726		, c-5
The execution of this statement as a partner constitute that the facts stated herein are true.	ites an affirmation under the penalties	of perju	ယ Iÿ
Signed this 9th day of MAY	2002		
Signature of TWO Partners:	Lightelly for		
Typed or printed names of partners signing above:	Ann Huffstatler Rou, Truster the Ann Huffsterler Rou Fam: Trust dated May 25, 1993 Leslie R. Huffstetler, Jr.		
Filing Fee	·		
Certified Copy (c	ptional): \$52.50		
Cerumeate of Statu	s (optional): \$8.75		

INHS66(1/00)