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## Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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From: GATL S. ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number: 072720000036 Phone: (407)843-4600 Fax Number: (407)843-4444

PLEASE ARRANGE FILING OF THE ATTACHED STATEMENT OF QUALIFICATION AND FILE AS FLEBO II, L.L.L.P., AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

## LIMITED PARTNERSHIP AMENDMENT

MECEIVED 02 JUL 23 PMI2: 49 VIS:OH OF CORPORATION

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Certificate of Status	0
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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 of State:
Insert limited partnership's Florida document number: A() 2 () () () () () () () () () () () () ()
2. Suffix adopted for the above named partnership:
3. The street address of its chief executive office: c/o Harrod Properties, Tuc.  (if different from current recorded address):  777 South Warboux Island Boulevard  Suite 877, Tampa, Florida 33602
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:  Gary W. Harrod  c/o Harrod Properties, Inc 777 South Harbour Island Boulevard  Suite 877, Tampa  Florida 33602
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 23rd day of July 2002
Signature of TWO Partners:  HARROD-BLAUVELT-OKUN, ILC, a Florida limited liability company  By:
Typed or printed names of partners signing above:

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