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Office Use Only

ROBERT C. MEYER, P.A.

2223 Coral Way MIAMI, FLORIDA 33146-3508

Phone (305) 285.8838

(305) 285.8919 Fax

November 21, 2002

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Advantage LLLP

Dear People,

Enclosed are the following items:

(a) Affidavit of Capital Contribution for a Florida Limited Partnership

(b) Certificate of Limited Partnership

(c) Statement of Qualification for Florida Limited Liability Limited Patthe

(d) A check for \$ 87.50 for the Affidavit of Capital Contributions and ব্রুদার্ক্তিবিদ্দানীর which includes the registration of the registered agent, and

(e) A check for \$ 25.00 for the Statement of Qualification

Should you have any question, please do not hesitate to call the undersigned at the phone number described above.

Sincerely,

Robert C. Meyer

encl: Documents mentioned above

cc: Mr. Lance Cooper (with enclosures)

RCM:yv



FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

November 27, 2002

ROBERT C. MEYER ROBERT C. MEYER, P.A. 2223 CORAL WAY MIAMI, FL 33145-3508

SUBJECT: ADVANTAGE, LLLP Ref. Number: W02000033662



We have received your document for ADVANTAGE, LLLP and your check(s) totaling \$112.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist N-7 AM 10: 23

Letter Number: 202A00063725

STATEMENT OF QUALIFICATIONS FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP.

1. The name of the limited partnership as identified in the records of the Florida Department of State:
ADVANTAGE !! L.D.
Insert limited partnership's Florida document number: 40300000028
<u>Attach</u> 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.P.)
3. The street address of its chief executive office: 12390 SW 131 Avenue, Miami, FL 33186 (if different from current recorded address)
4. The street address of principal office in Florida: 12390 SW 131 Avenue, Miami, FL 33186 (if different from current recorded address)
5. The limited partnership hereby elects to be a limited liability limited partnership.6. The effective date of this filing shall be:
$\sqrt{}$ as of the date this document is filed with the Florida Secretary of State
a date later than the time of filing:
7. The name and Florida street address of the partnership's agent for service of process: Robert C. Meyer
2223 Coral Way
Miami, Florida 33145
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 2/ day of November, 2002.
Signature of TWO Partners: Best Vest Corp. Signature of TWO Partners: Signature of TWO Partners:
Typed or printed names of partners signing above: LANCE COOPER: President of Best Vest Corp.
Filing Fee: \$25.00 Certified Copy (optional): \$ 52.50 Certificate of Status (optional): \$ \$ 8.75