

A03000000064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

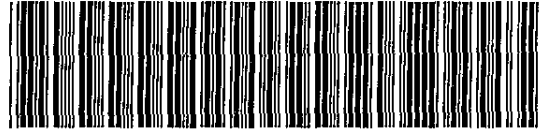
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Handleman Investments LLP

*please
file
2nd*

Signature _____

Requested by: _____

Name

Date

Time

Walk-In _____

Will Pick Up _____

- _____ Art of Inc. File _____
- ~~L.P.~~ Partnership File Qualification
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

HANDLEMAN INVESTMENTS LLLP

**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

The undersigned make the following declaration of information for the purpose of qualifying Handleman Investments LLLP as a Limited Liability Limited Partnership under the Florida Revised Uniform Partnership Act:

1. The name of the Limited Partnership as identified in the records of the Florida Department of State is Handleman Investments LLLP (the "Partnership"). The Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable Limited Partnership filing fees are attached.
2. The suffix adopted for the Partnership shall be LLLP.
3. The street address of its chief executive office is the same as the current recorded principal business address.
4. The street address of the principal office in Florida is the same as the current recorded principal business address.
5. The Partnership hereby elects to be a Limited Liability Limited Partnership.
6. The effective date of this filing shall be the date this document is filed with the Florida Secretary of State.
7. The name and Florida street address of the Partnership's agent for service of process is the same as the current recorded agent and address.

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 31st day of December, 2002.

**BANK ONE, N.A., as Trustee of the Joseph
Handleman Revocable Trust under Amended and
Restated Agreement dated October 31, 2001, as
amended, as Limited Partner**

By: Gary Wayne Gomoll
Name: Gary Gomoll, Vice President

HLI LLC, as General Partner

By: Gary Wayne Gomoll
Name: Bank One, N.A., as Trustee of the Joseph
Handleman Revocable Trust under Amended and
Restated Agreement dated October 31, 1997, as
amended, as Manager

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STATE OF FLORIDA