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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

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## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP OF ST. JOHNS PHASE 2 VENTURES LTD.

- The name of the limited partnership as identified in the records of the Florida 1. Department of State is St. Johns Phase 2 Ventures Ltd. Attached hereto is a copy of the limited partnership's Certificate of Limited Partnership, affidavit of capital contributions and applicable limited partnership filing fees.
- The limited partnership adopts the suffix "LLLP" and, upon the filing of this 2. Statement of Qualification, the name of this entity shall be St. Johns Phase 2 Ventures LLLP.
- The street address of the limited partnership's principal office in Florida and its 3. chief executive office is:

115 N.W. 167 Street, #300 North Miami Beach, Florida 33169.

- 4. The limited partnership hereby elects to be a limited liability limited partnership.
- The effective date of this filing shall be as of the date that this document is filed 5. with the Florida Secretary of State.
- The name and Florida street address of the limited partnership's agent for service of process required to be maintained pursuant to Section 620.105, Florida Statutes, as amended, are:

Granvil M. Tracy 115 N.W. 167 Street, #300 North Miami Beach, Florida 33169.

The execution of this statement as a partne	r constitutes a	an affirmation	under the pen	al
of perjury that the facts stated herein are tru	ıe.			į

Signed this \_\_\_ day of February, 2003.

GENERAL PARTNER:

St. Johns Phase 2 Executive LLC, a Floriday limited liability company

Granvil M. Tracy, Manager

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