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SEURETARY U. STAIR TALEAHASSEE, FEORIDA

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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: FALCON TITLE, LLLP.
	sert limited partnership's Florida Document number: <u> </u>
	ach certificate of limited partnership, affidavit of capital contributions and plicable limited partnership filing fees.
2.	Suffix adopted for the above named partnership: LLLP
3.	The street address of its chief executive office (if different from current recorded address:
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:
6.	The name and Florida street address of the partnership's agent for service of process: JARRELL BRITTS, 5020 Central Avenue, St. Petersburg, Florida 33707.
pe	e execution of this statement as a partner constitutes an affirmation under the nalties of perjury that the facts stated herein are true.
Siç	gned this 3rd day of February, 2003.
Ту	ped or printed names of a February and the signing above: EAGLE TITLE & ABSTRACT CORPORATION, 65 a Florida corporation, by JARRELL BRITTS,
	President

1ST NATION'S MORTGAGE, LLC., a Florida Limited Liability Company by JENNIFER CLARK, Manager