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(Business Entity Name)

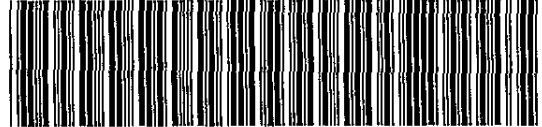
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Hansrob Properties, LLLP  
(Name of Limited Partnership)

The enclosed Supplemental Affidavit and fee(s) are submitted for filing, together with Akerman Senterfitt check no. 11069151 in the amount of \$1,750.00 for your filing fee.  
Please return all correspondence concerning this matter to the following:

Russell B. Hale  
(Name of Person)

Akerman Senterfitt  
(Firm/Company)

P.O. Box 231  
(Address)

Orlando, FL 32802-0231  
(City/State and Zip Code)

For further information concerning this matter, please call:

Russell B. Hale at ( 407 ) 419-8556  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

FILED

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A  
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of

Hansrob Properties, LLLP, a  
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,  
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 3,250,000.

This 18th day of May, 2005.

***FURTHER AFFIANT SAYETH NOT.***

*Under penalties of perjury, I declare that I have read the foregoing and that the facts are true, to the  
best of my knowledge and belief.*

General Partner(s)



Linda T. Grantham

Fees:	
\$7 per \$1000, based on additional	
contributions	
Minimum \$	52.50
Maximum \$	1750.00

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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