

A03000000613

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAW OFFICE OF
JONATHAN W. SHIRLEY, P.A.
ATTORNEY AND COUNSELOR AT LAW
171 CIRCLE DRIVE
MAITLAND, FLORIDA 32751

JONATHAN W. SHIRLEY

ADMITTED IN FLORIDA,
WEST VIRGINIA &
VIRGINIA

BOARD CERTIFIED TAX LAWYER

TELEPHONE (407) 629-8333
FACSIMILE (407) 629-8252

April 10, 2003

SENT VIA OVERNIGHT MAIL

Florida Department of State
Division of Corporations
Attention: New Filing Section
409 East Gaines Street
Tallahassee, Florida 32301

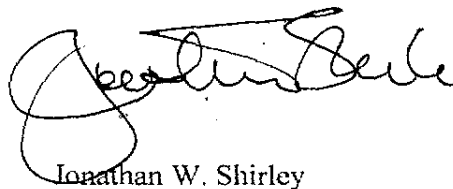
Re: Bowyer Family Limited Liability Limited Partnership RRLP

Gentlemen:

Enclosed are two (2) originals of the Certificate of Limited Partnership, Affidavit of Capital Contributions, and a Statement of Qualification for Florida Limited Liability Limited Partnership in the above-referenced matter. I have also enclosed a check in the amount of One Hundred Seventy Two Dollars (\$172.00) in payment of the Fifty Two Dollars and Fifty Cents (\$52.50) filing fee, Thirty Five Dollars (\$35.00) fee for designation of registered agent; Fifty Two Dollars and Fifty Cents (\$52.50) for the Certified Copy; Twenty Five Dollars (\$25.00) for the filing fee for the Statement of Qualification, and Seven Dollars (\$7.00) for the contribution fee. Once the Limited Liability Limited Partnership has been filed, a certified copy should be returned to this office.

If you have any questions, please contact me. Thank you.

Sincerely,



Jonathan W. Shirley

JWS/lp

Enclosures

cc: Mr. James Bowyer (with enclosures)

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03 APR 14 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Bowyer Family Limited Liability Limited Partnership, RLLP

Insert limited partnership's Florida document number:

A03000000613

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: RLLP

3. The street address of its chief executive office:
(if different from current recorded address):

520 South Magnolia Avenue
Orlando, FL 32801

4. The street address of principal office in Florida:
(if different from above):

520 South Magnolia Avenue
Orlando, FL 32801

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: _____

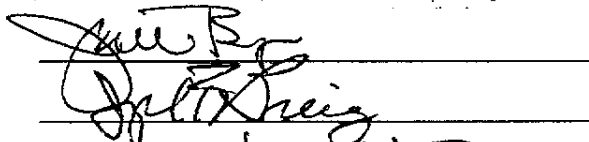
7. The name and Florida street address of the partnership's agent for service of process:

James W. Bowyer
520 South Magnolia Avenue
Orlando, FL 32801

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 March, 2003.

Signature of TWO Partners:



Typed or printed names of partners signing above:

JAMES W. BOWYER

JOSEPH F. BREIG, TRUSTEE

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03 APR 14 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA