

MAY 16-2003 FRI 03:00 PM Murai, Wald, Biondo

FAX NO. 305 358 9490

P. 01

Division of Corporations

Page 1 of 2

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Account Name : MURAI, WALD, BIONDO, MORENO, P.A.
Account Number : 076150002103
Phone : (305) 358-5900
Fax Number : (305) 358-9490

LIMITED PARTNERSHIP AMENDMENT

CITY WALK LIMITED PARTNERSHIP, LLLP

Certificate of Status	1
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Page Count	02
Estimated Charge	\$61.25

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 16, 2003

MURAI, WALD, BIONDO

SUBJECT: CITY WALK LIMITED PARTNERSHIP, LLLP
REF: W03000014126

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The statement of qualification needs to be sent under a separate cover sheet. This is done as a limited partnership amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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FAX NO. 305 358 9490
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P. 02
P. 02

**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:
City Walk Limited Partnership, LLLP

Insert limited partnership's Florida document number: A03000000758
or

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

2. Suffix adopted for the above named partnership: LLLP

(LLP, LLLP)

3. The street address of its chief executive office: 2221 Lee Road, Suite 28

(if different from current recorded address):

Winter Park, Florida 32789

4. The street address of principal office in Florida:

Same as above

(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: _____

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

Salvador Leccese

2221 Lee Road, Suite 28

Winter Park, Florida 32789

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 15th day of May, 2003

Signature of TWO Partners: _____

Typed or printed names of partners signing above: Leccese City Walk, Inc. by Salvador Leccese

Leccese Family Partnership, Ltd.

By: Leccese Holdings, Inc.

Filing Fee: \$25.00 By: Salvador Leccese

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75