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SCANLON & CROYLE

ATTORNEYS AT LAW AN ASSOCIATION OF PROFESSIONAL CORPORATIONS

PHILIP J. CROYLE, P.A.

Lawpjcroyle@bellsouth.net

REPLY TO FLORIDA | X | CRYSTAL CORPORATE CENTER 2500 N. MILITARY TRAIL . SUITE 480 BOCA RATON FLORIDA 33431-6344 561.893.0544 Fax 561.893.6798

July 24, 2003

Division of Corporations Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

RE: **NEW FILING**

SCANLON & CROYLE, L.L.P.

Dear Sir or Madam:

Enclosed please find our Statement of Qualification for Florida Limited Liability Limited Partnership along with our Certificate of Limited Partnership and Affidavit of Capital Contributions. Also enclosed is our general account check in the sum of \$52.50 representing the filing fee for the limited partnership and our check in the sum of \$25.00 representing the filing fee for the limited liability limited partnership.

Please process this paperwork in your normal course. If you have any questions or should more be needed, please contact the undersigned at the above Florida office.

Very truly yours,

SCANLON & CROYLE

PHILIP J. CROYKE, P.

PHILIP J. CROYLE

For the Firm

pjc/sfd

Enclosures

LAWRENCE J. SCANLON, P.A. *

LJStortlaw@msn.com

* Certified Civil Trial

** Also admitted in Ohio 156 SOUTH MAIN STRE

1011 FLOOR AKRON, OHIO 44308

330.376.1440 Fax 330.376.0257

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:
Scanlont Croyle, Lille?
Insert limited partnership's Florida document number: A0300001152 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, L.L.P.)
3. The street address of its chief executive office: 2500 N. m. C. T. S. H. 410
(if different from current recorded address): Saco Roton, Ft 33431
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: as of the date this document is filed with the Florida Secretary of Strate or
5. The limited partnership hereby elects to be a limited liability limited partnership. 6. The effective date of this filing shall be: 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:
7. The name and Florida street address of the partnership's agent for service of process:
Philip J. Crayle
2500 to wait have Fraid, Solide 480
Basa Ratan Florida 37431
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 15 day of Jack
Signature of TWO Partners: Scowwood Co. Cuc
Typed or printed names of partners signing above: PLANA Communication
Lowerner Sconwor For Sconson
Filing Fee: \$25.00 Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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