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## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP



- 1. The name of the limited partnership including the adopted suffix as will be identified in the records of the Florida Department Of State is: ATHENA FUNDING GROUP VI, LLLP. The Certificate of Limited Partnership, Affidavit of Capitol Contributions for a Limited Liability Limited Partnership, and the applicable filing fees are attached.
- 2. The address of the partnership is: 5035 East Busch Blvd., Suite #5, Tampa, Florida 33617.
- 3. The name and address of the partnership's agent for service of process is: Michael J. Weinard, 5035 East Busch Blvd., Suite #5, Tampa, Florida 33617.
- 4. The effective date of this filing shall be the 1<sup>st</sup> day of January, 2004.

The limited partnership, Athena Funding Group VI, LLLP, hereby elects to be a limited liability limited partnership pursuant to the laws of the State of Florida.

Executed this 16<sup>th</sup> day of December, 2003, as affirmation under penalties of perjury that the facts stated herein are true.

Michael J. Weinard, President Athena Funding Group, Inc. General Partner of Athena Funding Group III, LLLP

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of December, 2003, by Michael J. Weinard as President of ATHENA FUNDING GROUP, INC., Florida Corporation, on behalf of the corporation, as General Partner of ATHENA FUNDING GROUP VI, LLLP, a Florida limited liability limited partnership. He is personally known to me.

Notary Public, State of Florida

Robert I. Schmit

