

Division of Corporations

A04000000151

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813)229-7600
Fax Number : (813)229-1660

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DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP AMENDMENT

K FIVE LIMITED PARTNERSHIP

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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: K Five Limited Partnership

Insert limited partnership's Florida document number: A04000000151

or

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

K Five, LLLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: Dr. Nazeer Khan (if different from current recorded address): 2345 U.S. Highway 19, Suite 450 Holiday, FL 34691

4. The street address of principal office in Florida: Same (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: Bruce H. Gordon, Esq., Shumaker, Loop & Kendrick, LLP 101 E. Kennedy Blvd., Suite 2800 Tampa Florida 33602

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 27 day of January, 2004

Signature of TWO Partners:

[Handwritten signature]

Typed or printed names of partners signing above: Nazeer H. Khan

Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

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