

A040000000167

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(Document Number)

Certified Copies _____ Certificates of Status _____

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04 FEB -2 PM 12:45
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04 FEB -2 AM 10:16
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS
AND BUSINESSES
TALLAHASSEE, FLORIDA

h37c



UCC FILING & SEARCH SERVICES, INC.
526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY
February 2, 2004

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

PNP Investments, Ltd.

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | Non Profit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of RA Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Reports |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |
| <input type="checkbox"/> | Reinstatement |

| REGISTRATION/QUALIFICATION | |
|----------------------------|-------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

X stmt of qual

**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership in the records of the Florida Department of
State: **PNP INVESTMENTS, LTD.**

Insert limited partnership's Florida document number:

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**

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

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 of the Florida street address of the partnership's agent for service of
process:

**Atrium Registered Agents, Inc.
1500 San Remo Avenue, Suite #125
Coral Gables, Florida 33146**

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 29th day of JANUARY, 2004.

Signatures of TWO Partners: **Please see the attached Schedule A**

Typed or printed names of partners: **Douglas Raymond Parent,
General Partner
Douglas Raymond Parent Living Trust,
Limited Partner**

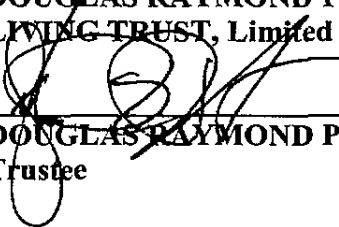
SCHEDULE A

Signatures of TWO Partners:



DOUGLAS RAYMOND PARENT,
General Partner

DOUGLAS RAYMOND PARENT
LIVING TRUST, Limited Partner

By: 

DOUGLAS RAYMOND PARENT,
Trustee