

Feb. 26, 2004 1:34PM fpa

Division of Corporations

4-05-08

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Florida Department of State
Division of Corporations
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From:

Account Name : PURCELL, FLANAGAN & HAY, P.A.
Account Number : 071722000522
Phone : (904) 355-0355
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LIMITED PARTNERSHIP AMENDMENT

WOODSTOCK, L.L.P.

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Page Count	04
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Department of State 2/28/2004 1:04 PAGE 1/1 RightFAX



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 26, 2004

purcell, flanagan & hay

SUBJECT: WOODSTOCK, L.L.L.P.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

This need to be sent under limited partnership amendment.

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

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 704A00012911

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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E04000042247 3STATEMENT 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:
WOODSTOCK, L.L.L.P.

Insert limited partnership's Florida document number: A04000000305

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:

WOODSTOCK, L.L.L.P.

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

3. The street address of its chief executive office: SAME
(if different from current recorded address):

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:

XX 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:

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, Florida 33324

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 17th day of Feb., 2004.

Signature of TWO Partners:

James B. Ferguson

Typed or printed names of partners signing above: James B. Ferguson

John P. Cole, Esquire
1548 Lancaster Terrace
Jacksonville, FL 32204
Telephone: (904) 355-0355
Fla. Bar No.: 898155

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
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Signed this 17th day of February, 2004

Signature of TWO Partners:

Catherine F Locatis

Typed or printed names of partners signing above:

Catherine Locatis

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

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