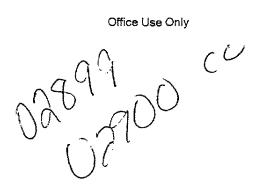
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
912	Qual	up
	CC	
	Office Use Only	



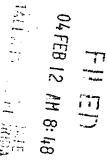


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Alan D. Henderson

Robert H. Sturgess

Frank R. Keasler Jr.

February 10, 2004

VIA FEDERAL EXPRESS OVERNIGHT DELIVERY TRACKING NUMBER: 844833760411

Division of Corporations 409 East Gaines Strect Tallahassee, Florida 32399

Re: The Preserve on Anastasia Island, LP

Dear Sir or Madam:

Enclosed for filing are the following:

- 1. Affidavit and Certificate of Limited Partnership of The Venetian on the Ortega, LP.
- 2. Statement of Qualification for Florida Limited Liability Limited Partnership.

In this regard, please accept our firm's check in the amount of \$1,915.00 for fees as follows:

Filing Fee		\$1,750.00
Designation of Registered Agent		35.00
Statement of Qualification FL LLLP	Λ	25.00
Certified Copy Fee for Stmt. of Qualif.	$\mathcal{N}(\mathcal{I})$	52.50
Certified Copy Fee for LP Certif.		52.50
Certificate of Status	_	<u>8.75</u>
Subtotal		\$1,923.75

Please acknowledge receipt of these documents by date stamping the enclosed copy of this letter and returning same with the requested certified copies.

If you have any questions in this regard please contact our firm.

Sincerely,

HENDERSON KEASLER LAW FIRM

Paralegal to Douglas R. Maxwell

/kk

Enclosures

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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 De of State: The Preserve on Anastasia Island, LP.	epartment		
Insert or	ert limited partnership's Florida document number:	• :	: -	-
Attach	ach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicated partnership filing fees.	ible		
2	The complete name of the entity after filing Statement of Qualification shall be: The Preserve on Anastasia Island, LLLP.			
3.	The street address of its chief executive office: 1518 Koenig Lane Austin, Texas 78756			
4.	The street address of principal office in Florida: 2451 South Ponte Vedra Blvd. Ponte Vedra Beach, Florida 32	082		
5.	The limited partnership hereby elects to be a limited liability limited partnership	٠.		
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 pro-	cess:	,	
	Douglas R. Maxwell San Pablo Office Park 4309 Pablo Oaks Court, Suite 5 Jacksonville, Florida 32224			
	e execution of this statement as a partner constitutes an affirmation under the penaltie jury that the facts stated herein are true.	s of Ξ_{-}	04 FEB	
	ned this 6th day of February, 2004.		EB 12	11
Signat	nature of Two Partners:	Entropy (Control of the Control of t	A.	17
	ONTECITO ANASTASIA ISLAND, INC., a Florida poration, as sole general partner		84 :8	
By: Printed Title:	nted Name: Joellyn Conk le: Vice President/Secretary Printed Name: Joellyn Conk a Limited Partner			
	Filing Fee: \$25.00 Certified Copy (optional): \$52.50			
	Certificate of Status (optional): \$8.75			