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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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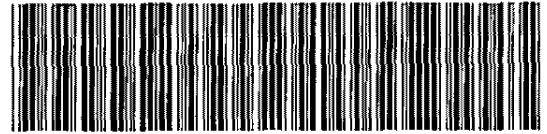
(Business Entity Name)

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**ARNOLD, MATHENY & EAGAN, P.A.**

**ATTORNEYS AND COUNSELORS AT LAW**

801 N. MAGNOLIA AVE., SUITE 201

ORLANDO, FLORIDA 32803-3842

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TELEPHONE (407) 841-1550  
FACSIMILE (407) 841-8746

TELEPHONE (407) 331-7042  
FACSIMILE (407) 331-3030

Reply to: Orlando

March 11, 2004

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Popat Investment Partners Ltd LLP

Dear Sir or Madam:

Enclosed under cover of this letter please find the following documents to be filed on behalf of Popat Investment Partners Ltd LLP. Also enclosed please find check number 17717 in the amount of \$320.00 (please note breakdown below).

1. Statement of Qualification for Florida Limited Liability Partnership - \$25.00
2. Partnership Registration Statement - \$50.00
3. Certificate of Limited Partnership - \$35.00
4. Affidavit of Capital Contributions for Florida Limited Partnership - \$210.00

If you have any questions, please do not hesitate to contact the undersigned at 841-1550.

Thank you for your assistance.

Sincerely,



Dale Barnett  
Executive Assistant

Enclosures

cc: Vipin Popat, M.D.

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**ATTORNEYS AND COUNSELORS AT LAW**

801 N. MAGNOLIA AVE., SUITE 201

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TELEPHONE (407) 841-1550  
FACSIMILE (407) 841-8746

TELEPHONE (407) 331-7042  
FACSIMILE (407) 331-3030

Reply to: Orlando

March 29, 2004

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Popat Investment Partners Ltd LLP - Filing Date of March 12, 2004

Dear Sir or Madam:

Enclosed under cover of this letter please find the following documents to be filed on behalf of Popat Investment Partners Ltd LLP. Also enclosed please find check number 20711 in the amount of \$1,810.00 (please note breakdown below).

1. Statement of Qualification for Florida Limited Liability Partnership - \$25.00
2. Affidavit of Capital Contributions for Florida Limited Partnership - \$1,785.00

If you have any questions, please do not hesitate to contact the undersigned at 407-841-1550.

Thank you for your assistance.

Sincerely,



Dale Barnett  
Executive Assistant

Enclosures

cc: Vipin Popat, M.D.

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DIVISION OF CORPORATIONS  
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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:  
Popat Investment Partners LLLP

Insert limited partnership's Florida document number: \_\_\_\_\_  
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:  
Popat Investment Partners LLLP

3. The street address of its chief executive office: 8731 Summerville Place  
(if different from current recorded address): Orlando, Florida 32819

4. The street address of principal office in Florida: 8731 Summerville Place  
(if different from above) Orlando, Florida 32819

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: \_\_\_\_\_

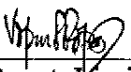
7. The name and Florida street address of the partnership's agent for service of process:  
AM&E Services LLC  
801 N. Magnolia Avenue, Suite 201  
Orlando, Florida 32803

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 9<sup>th</sup> day of March, 2004.

Signature of two Partners: Popat Group LLC, General Partner

  
By: Vipin Popat, Managing Director

  
Vipin Popat, Limited Partner

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