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Rob Angerer

(Requestor's Name)

P.O. Box 10468

(Address)

Fla

(Address)

Tallahassee, FL 32302 576-5982

(City/State/Zip/Phone #)

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(Business Entity Name)

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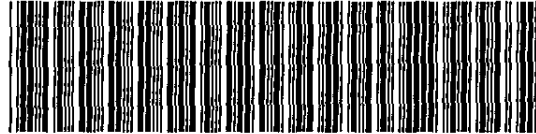
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TALLAHASSEE, FLORIDA
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**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:
JATX Ltd.

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Insert limited partnership's Florida document number: A04000000749

or

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

JATX, LLLP

(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: 7268 Blountstown Highway

(if different from above)

Tallahassee, Florida 32310

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:

CT Corporation

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 11th day of April, 2005

Signature of ~~FED~~ Partners:

Sole General

J. Azad

Typed or printed names of partners signing above: Jamil Azad, President

Azad Oil Exploration, Inc.

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75