

A04000000766

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Fax Number : (850) 295-0383

From: Account Name : HADDOCK PROFESSIONAL ASSOCIATION
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LIMITED PARTNERSHIP AMENDMENT

DR. HADDOCK, LTD.

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 17, 2004

DR. HADDOCK, LTD.
3300 UNIVERSITY BLVD., SUITE 218
WINTER PARK, FL 32792

SUBJECT: DR. HADDOCK, LTD.
REF: A04000000766

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You will need to file under the corporation menu for a limited partnership amendment.

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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:
Dr. Haddock, Ltd.

Insert limited partnership's Florida document number: AD4000000766

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:

Dr. Haddock, LLLP

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

3. The street address of its chief executive office:

(if different from current recorded address):

4. The street address of principal office in Florida:

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

Haddock Professional Association

3300 University Blvd., Suite 218

Winter Park, Florida 32792

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 _____ day of May, 2004.

Signature of TWO Partners:

Typed or printed names of partners signing above: J. Brook McClane, Manager of GP

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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