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(Requestor's Name)

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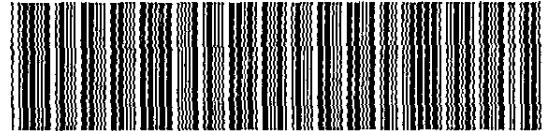
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JP
71504

CARLA DELOACH BRYANT
ATTORNEYS & COUNSELLORS AT LAW

June 30, 2004

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

Re: Filing Certificate of Limited Partnership for Herculean LLLP

Dear Sir or Madam:

Please find enclosed the following documents for filing:

- (1). Certificate of Partnership;
- (2). Affidavit of Capital Contributions;
- (3). Designation of Registered Agent;
- (4). Statement of Qualification for Florida Limited Liability Limited Partnership for Herculean LLLP; and
- (5). Check for \$130.00, made payable to the Department of State. This amount is for the following items:

- \$35.00 fee for Designation of Registered Agent;
- \$52.50 fee based upon the total amount of current and anticipated capital contributions;
- \$8.75 fee for a Certificate of Status for the Limited Partnership;
- \$25.00 fee for the Statement of Qualification for Florida Limited Liability Limited Partnership; and
- \$8.75 fee for a Certificate of Status for the Statement of Qualification for Florida Limited Liability Limited Partnership.

Thank you for your assistance in this matter. If you have any questions, please contact my office.

I remain

Very truly yours,

Rebekah M. Kurdziel

Rebekah M. Kurdziel
For the Firm

RMK/tk
enclosures
cc: client file

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP OF
HERCULEAN LLLP
A FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

The undersigned sole General Partner, desiring to form a Limited Liability Limited Partnership pursuant to the laws of the State of Florida, declares:

(1). The name of the Partnership is Herculean LLLP.

(2). The mailing address of the Partnership is:

P.O. Box 878
Winter Park, Florida 32790

(3). The address of the principal place of business of the Partnership is:

400 North New York Avenue, Suite 105
Winter Park, Florida 32789

(4). The name and address of the Registered Agent for Service of Process on the Partnership are:

Ira Kitograd
400 North New York Avenue, Suite 105
Winter Park, Florida 32789

(5). The name and business address of the sole General Partner is:

IBK @ Windsong, Inc. *103-471000*
P.O. Box 878
Winter Park, Florida 32790

(6). The latest date upon which the Partnership shall dissolve is December 31, 2054.

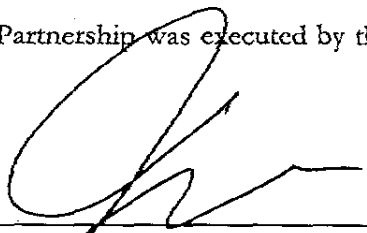
The execution of this Certificate of Limited Partnership by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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TALLAHASSEE, FLORIDA

HERCULEAN LLLP

CERTIFICATE OF LIMITED PARTNERSHIP

On this 11th day of June, 2004, this Certificate of Limited Partnership was executed by the sole General Partner of Herculean LLLP.


Ira Kitograd, as President of IBK @
Windsong, Inc., as General Partner in
Herculean LLLP

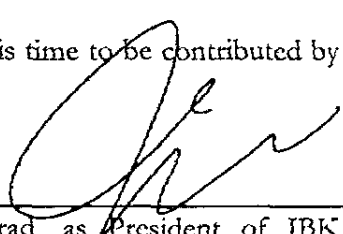
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TALLAHASSEE, FLORIDA

THIS CERTIFICATE OF LIMITED PARTNERSHIP WAS PREPARED BY
THE LAW OFFICES OF CARLA DELOACH BRYANT, P.A.
1201 SOUTH ORLANDO AVENUE, SUITE 350 WINTER PARK, FLORIDA 32789
TELEPHONE 407.740.5005

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

Ira Kitograd, as President of IBK @ Windsong, Inc., a Florida corporation, the sole General Partner of Herculean LLLP, a Florida Limited Liability Limited Partnership, personally appeared before me, the undersigned authority, and upon being duly sworn, certified as follows:

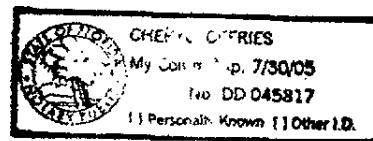
- (1). The amount of capital contributions made to date by the Limited Partners to the Partnership, in the aggregate, is \$ 0.00.
- (2). The additional capital contributions anticipated at this time to be contributed by the Limited Partners is \$ 0.00.


Ira Kitograd, as President of IBK @ Windsong, Inc., as General Partner in Herculean LLLP

STATE OF FLORIDA
COUNTY OF ORANGE

On this 11th day of June, 2004, Ira Kitograd, as President of IBK @ Windsong, Inc., the sole General Partner of Herculean LLLP, a Florida Limited Liability Limited Partnership, swore to or affirmed and subscribed this Affidavit of Capital Contributions before me and produced Florida Driver's License Number K326-402-64-170-0 as identification.


Notary Public, State of Florida



THIS AFFIDAVIT OF CAPITAL CONTRIBUTIONS WAS PREPARED BY
THE LAW OFFICES OF CARLA DELOACH BRYANT, P.A.
1201 SOUTH ORLANDO AVENUE, SUITE 350 WINTER PARK, FLORIDA 32789
TELEPHONE 407.740.5005

**CERTIFICATE DESIGNATING REGISTERED AGENT
AND
STREET ADDRESS FOR SERVICE OF PROCESS WITHIN THE
STATE OF FLORIDA**

Desiring to organize under the laws of the State of Florida, Herculean LLLP designates Ira Kitograd, located at: 400 North New York Avenue, Suite 105, Winter Park, Florida 32789, as its Registered Agent to accept Service of Process within the State of Florida pursuant to Florida Statutes section 48.061.

ACCEPTANCE OF DESIGNATION

The undersigned accepts the designation as Registered Agent to accept Service of Process for the Herculean LLLP, at the place designated above, and agrees to comply with the provisions of Florida Statutes section 48.061 relative to maintaining an office for the Service of Process.



Ira Kitograd

THIS CERTIFICATE DESIGNATING REGISTERED AGENT WAS PREPARED BY...
THE LAW OFFICES OF CARLA DELOACH BRYANT, P.A.
1201 SOUTH ORLANDO AVENUE, SUITE 350 WINTER PARK, FLORIDA 32789
TELEPHONE 407.740.5005

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