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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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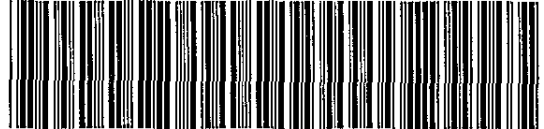
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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LAW OFFICES  
**SIMON & SIMON, P.A.**

**SEYMOUR J. SIMON** (1943-1984)

**GARY P. SIMON**

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CONCENTRATING IN CORPORATE, BUSINESS, and REAL PROPERTY

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September 1, 2004

Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

**RE: Set up and Conversion to 167<sup>TH</sup> STREET SHOPPING CENTER, LLLP**

Dear Sir or Madam:

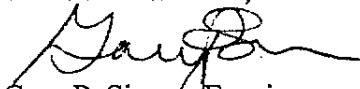
In connection with the above mentioned matter, enclosed please find the following documents for filing:

1. Affidavit of Capital Contributions for Florida Limited Partnership
2. Certificate of Limited Partnership
3. Statement of Qualification for Florida Limited Liability Limited Partnership
4. Certificate of Conversion
5. Check in the amount of **\$1,886.25** to cover the costs of filing; these.

a.	Filing Fee	\$1,750.00
b.	Registered Agent	\$ 52.50
c.	Certified Copy	\$ 25.00
d.	Statement of Qualification	\$ 25.00
e.	Certificate of Status	\$ 8.75
f.	Conversion Certificate	\$ 25.00

Please send the certified copy in the envelope provided for your convenience. Thank you for your attention to this matter.

Sincerely yours,  
SIMON & SIMON, P.A.

  
Gary P. Simon, Esquire

GPS/lcv

cc: W. James Orovitz w/o enc.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: 167<sup>th</sup> Street Shopping Center, LLLP, a limited liability limited partnership

Insert partnership's Florida document number: \_\_\_\_\_

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLLP  
("Registered Limited Liability Partnership", "Limited Liability Partnership", "R.L.L.P.", "L.L.P.", "RLLP", or "LLP")

3. The street address of its chief executive office: 13635 Deering Bay Drive, #224, Coral Gables, FL 33158  
(If different from current recorded address)

4. The street address of principal office in Florida: 13635 Deering Bay Drive, #224, Coral Gables, FL 33158  
(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:

Gary P. Simon, Esquire, 9100 S. Dadeland Blvd., Suite 504, Miami, FL 33156

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 28<sup>th</sup> day of June, 2004.

167<sup>th</sup> Street Shopping Center, LLLP, a limited liability  
limited partnership

Signatures of ONE Partner:

By: W. James Orovitz, general partner

Typed or printed name of partners signing above: W. James Orovitz