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From: Vera Torres

Account Name : I

: LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036

Phone

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Fax Number : (407)843-4444

PLEASE ARRANGE FILING WITH THE NAME WEST VOLUSIA TOWN CEETRE, ILLP AND WITH A FILING DATE OF NOVEMBER 19, 2004, THE DATE OF THE FILING OF THE CERTIFICATE OF LIMITED PAPTNERSHIP, AND RETURN A CERTIFICATE TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE.

LIMITED PARTNERSHIP AMENDMENT

WEST VOLUSIA TOWN CENTRE, LTD.

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STATEMENT OF OUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

West Volusia Town Centre, Ltd., a Florida limited partnership, hereby makes and files with the Secretary of State of the State of Florida, this Statement of Qualification for Florida Limited Liability Limited Partnership for the purpose of qualifying as a limited liability limited partnership in accordance with Section 620.187 of the Florida Uniform Limited Partnership Act (1986).

- 1. <u>NAME</u>. The name of the partnership is West Volusia Town Centre, Ltd., a Florida limited partnership (the "Partnership").
 - 2. SUFFIX. The suffix adopted for the Partnership is "LLLP."
- 3. <u>ADDRESS</u>. The street address of the Partnership's chief executive office is 605 East Robinson Street, Suite 420, Orlando, Florida 32801, and the street address of its principal office in the State of Florida is 605 East Robinson Street, Suite 420, Orlando, Florida 32801.
- 4. <u>REGISTERED AGENT</u>. The name of the Partnership's registered agent for service of process is M. W. Jeffrey Brock, and his street address is 605 East Robinson Street, Suite 420, Orlando, Florida 32801.
- 5. <u>ELECTION</u>. The Partnership hereby elects to be a limited liability limited partnership.
- 6. <u>EFFECTIVE DATE</u>. The effective date of this filing shall be as of the date this document is filed with the Florida Secretary of State.

EXECUTED this 19th day of November, 2004.

FLORIDA CENTRES, INC.	, a Florida ≓	1
corporation By:		1
M. W. Jeffrey Brock, Presi	ident 💛 🕻	
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SOLE GENERAL PARTNER:

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