

A04000002110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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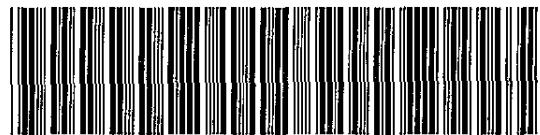
(Business Entity Name)

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
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| <b>NEW FILINGS</b> |                   |
|--------------------|-------------------|
|                    | Profit            |
|                    | NonProfit         |
|                    | Limited Liability |
|                    | Domestication     |
|                    | Other             |

| <b>AMENDMENTS</b> |                                        |
|-------------------|----------------------------------------|
|                   | Amendment                              |
|                   | Resignation of R.A., Officer/ Director |
|                   | Change of Registered Agent             |
|                   | Dissolution/Withdrawal                 |
|                   | Merger                                 |

| <b>OTHER FILINGS</b> |                  |
|----------------------|------------------|
|                      | Annual Report    |
|                      | Fictitious Name  |
|                      | Name Reservation |

| <b>REGISTRATION/QUALIFICATION</b> |                     |
|-----------------------------------|---------------------|
|                                   | Foreign             |
|                                   | Limited Partnership |
|                                   | Reinstatement       |
|                                   | Trademark           |
|                                   | Other               |

## STATEMENT OF QUALIFICATION OF FLORIDA REGISTERED LIMITED LIABILITY PARTNERSHIP

Under F.S. 620.187 and 620.9001, the limited partnership named below submits the following statement of qualification to be registered as a limited liability partnership.

1. Name of partnership or limited partnership submitting this statement to register as a limited liability partnership: Vital Properties, Ltd.
2. Address of chief executive office: 2815 NW 13th Street, Suite 423, Gainesville FL 32609
3. Address of principal office: 2815 NW 13th Street, Suite 423, Gainesville FL 32609
4. Registered agent for service of process: Ropen Nalbandian, 2815 NW 13th Street, Suite 423, Gainesville FL 32609  
Signature of Registered Agent: Ropen Nalbandian
5. The partnership elects to be a limited liability partnership.
6. Effective date of qualification of the Florida registered limited liability partnership:  
1/1/2005.
7. The limited liability partnership will be known as Vital Properties, Ltd., LLP

This statement of registration of Florida registered limited liability partnership is executed in compliance with F.S. 620.9001(3).

Signed on 12/29, 2004.

Ropen Nalbandian  
Ropen Nalbandian