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TALLAHASSEE, FLORIDA

W04-46896
DEC 23 2004

J. BRYAN JAN - 7 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAM Ltd.
(Name of Limited Partnership)

DOCUMENT NUMBER: _____

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Sorgi
(Name of Person)

Sullivan, Sorgi and Dimmock, LLP
(Firm/Company)

50 Staniford Street, Suite 804
(Address)

Boston, MA 02114-2517
(and Zip Code)

For further information concerning this matter, please call:

David Sorgi at (617) 742-2150
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 23, 2004

DAVID SORGI
SULLIVAN, SORGI AND DIMMOCK, LLP
50 STANIFORD STREET, SUITE 804
BOSTON, MA 02114-2517

SUBJECT: CAM LTD.
Ref. Number: W04000046896

COPY

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DIVISION OF CORPORATIONS

We have received your document for CAM LTD. and your check(s) totaling \$77.50. However, the document has not been filed and is being retained in this office for the following:

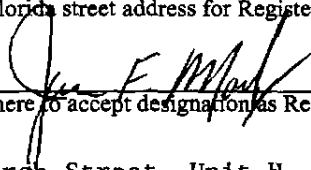
There is a balance due of \$35.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 704A00071311

CERTIFICATE OF LIMITED PARTNERSHIP

1. CAM Ltd.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 4422 North Church Street, Unit H, Tampa, FL 33614
(Business address of Limited Partnership)
3. James F. Manley
(Name of Registered Agent for Service of Process)
4. 4422 North Church Street, Unit H, Tampa, FL 33614
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 4422 North Church Street, Unit H, Tampa, FL 33614
(Mailing Address of the Limited Partnership)

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7. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2054

8. Name(s) of general partner(s): _____ Street address: _____

<u>James F. Manley</u>	<u>Unit H</u>
_____	<u>4422 North Church Street</u>
_____	<u>Tampa, FL 33614</u>

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

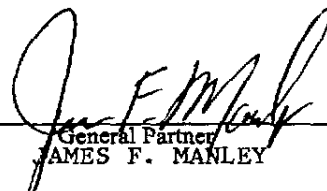
Signed this 8th day of December, 2004.

Signature of all general partners:

General Partner

General Partner

General Partner


General Partner
JAMES F. MANLEY
General Partner

General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of CAM Ltd.

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 0.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 5,000.

Signed this 8th day of December, 2004.

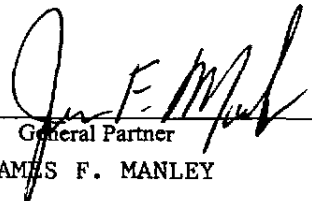
FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

General Partner

General Partner

General Partner



General Partner
JAMES F. MANLEY

General Partner

General Partner

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