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To:

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From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone

: (850)521-1000

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SIVISION OF CORPORATI

LIMITED PARTNERSHIP AMENDMENT

1607 E. LAKE DRIVE, LTD.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$105.00

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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

	The name of the limited partnership as identified in the records of the Florida Department of State: 607 E. Lake Drive, Ltd.
or A	sert limited partnership's Florida document number: <u>A0500000124</u> ttach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited artnership filing fees.
2.	The complete name of the entity after filing Statement of Qualification shall be:
1	507 E. Lake Drive, LLLP
	(Must include LLLP or L.L.P.)
3.	The street address of its chief executive office: (if different from current recorded address):
4.	The street address of principal office in Florida:
5.	The limited partnership hereby elects to be a limited liability limited partnership.
б.	The effective date of this filing shall be: a sof the date this document is filed with the Florida Secretary of State a date later than the time of filing: The name and Florida street address of the partnership's agent for service of process:
7.	LOTDEO. INC.
	2699 S. Bayshore Drive, 7th Floor
	2699 S. Bayshore Drive. 7th Floor Miami Florida 33133 Florida 33133 Florida 33133 To a see execution of this statement as a partner constitutes an affirmation under the penalties of perjurbit the facts stated herein are true.
Si	gned this 42 day of January , 2005 .
	gnature of TWO Partners: Under Soft
Ту	ped or printed names of partners signing above: Michael D. Katz

Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75