Florida Department of State

Division of Corporations

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To:

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Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO

Account Number : I200I0000078 Phone : (407)843-8880

Fox Number

: (407)244-5690

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H05-118

5 LIMITED PARTNERSHIP AMENDMENT SCOTTISH PRIMROSE, LTD.

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## +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:

SCOTTISH PRIMROSE, LTD.

Insert limited partnership's Florida document number:
or
Attach certificate of limited partnership, affidavit of capital contributions and applicable

Attach certificate of limited partnership, attidavit of capital contributions and applicable limited partnership filling fees.

2. Suffix adopted for the above named partnership:

LLLP (LLLP, L.L.L.P.)

3. The street address of its chief executive office: (if different from current recorded address):

1011 N. Wymore Road Winter Park, Florida 32789

- The street address of principal office in Florida;
   (if different from above)
- 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:

Pamela O. Price 301 East Pine Street, Suite 1400 Orlando, Florida 32801

The execution of this statement as a partner constitutes an affirmation under the penalt of perjury that the facts stated herein are true.

Signed this 9 day of June, 2005.

Signature of ONE PARTNER:

GENERAL PARTNER:

CDE MANAGEMENT, INC

Typed or printed names of partners signing above:

Christopher A. Holler, President

# 395265 vl