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TALLAHASSEE, FLORIDA

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October 18, 2004

Florida Department of State  
Division of Corporations  
Limited Partnership Filings  
Post Office Box 6327  
Tallahassee, Florida 32314

FILED  
2005 JUL 11 PM 3:37  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Re: The Cervasio Family Limited Partnership, LLLP (the "Partnership")  
Our File No.: 4436-2

Dear Sir/Madam:

Enclosed please find original copies of the following:

1. Statement of Qualification for Florida Limited Liability Limited Partnership;
2. Affidavit of Capital Contributions for Florida Limited Partnership; and
3. Certificate of Limited Partnership.

Also enclosed is our check in the amount of \$86.25, which represents the fee associated with recording the above documents with your office.

If you have any questions or comments, please call.

Sincerely,

  
Gary A. Forster

GAF/tj

**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:  
The Cervasio Family Limited Partnership, LLLP

Insert limited partnership's Florida document number: \_\_\_\_\_

or

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

The Cervasio Family Limited Partnership, LLLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 6227 St. Ives Blvd.  
(if different from current recorded address): Orlando, Florida 32819

4. The street address of principal office in Florida: \_\_\_\_\_  
(if different from above) \_\_\_\_\_

5. 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:

6227 St. Ives Blvd.

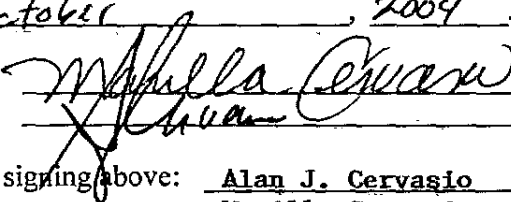
Orlando, Florida 32819

Florida

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

Signed this 13<sup>th</sup> day of October, 2004

Signature of TWO Partners:



Typed or printed names of partners signing above:

Alan J. Cervasio

Marilla Cervasio

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

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