

JUL 13 2005 12:47 PM BUTZEL AND LONG

TO 18502050383

P. 01/02

Florida Department of State
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Account Name : BUTZEL LONG
Account Number : 105147001567
Phone : (561) 368-2151
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LIMITED PARTNERSHIP AMENDMENT

POLLY FAMILY, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	01
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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:
POLLY FAMILY, LLLP

Insert limited partnership's Florida document number: A05000001341

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:

POLLY FAMILY, LLLP

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

3. The street address of its chief executive office: 2901 SOUTH OCEAN BOULEVARD
(if different from current recorded address): HIGHLAND BEACH, FL 33487

4. The street address of principal office in Florida: 2901 SOUTH OCEAN BOULEVARD
(if different from above) HIGHLAND BEACH, FL 33487

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:

JOHN J. RAYMOND, JR.

BUTZEL LONG, 1200 NORTH FEDERAL HIGHWAY, SUITE 420

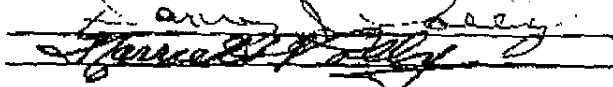
BOCA RATON

Florida 33432

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 7th day of July, 2005

Signature of TWO Partners:



Typed or printed names of partners signing above: HARVEY POLLY

HARRIETT POLLY

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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