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M. HODGES

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: TNVc5tmentS PLANT LTD	
The complete name of the entity after filing Statement of Qualification shall be: THUCS MENTS PLANT, LLLP	
FLANT	
The street address of its chief executive office:	in Since Sin
2506 Azeele Street Tampa, FL 33609	enner Tar
The street address of principal office in Florida:	7
2506 Azeele Street Tampa, FL 33609	~ ~
The limited partnership hereby elects to be a limited liability limited partnership).
The name and Florida street address of the partnership's agent for service of pro-	cess:
Terence S. Moore 2506 Azeele Street Tampa, FL 33609	
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	_•
Signatures of TWO Partners:	
Many Fatricia Moore, Managing Mem	
Zere Moore, Limited Partner	<u>. </u>