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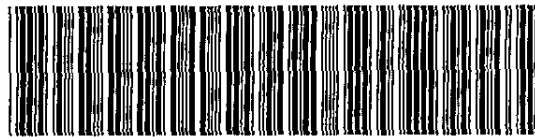
Special Instructions to Filing Officer:

CORP FILED

W05-33678 1023,
539

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800056019378

07/21/05--01048--021 **35.00

07/07/05--01002--017 **1750.00

FILED
05 JUL 07 AM 10:11
SEC. OF STATE
TALLAHASSEE, FLORIDA

FILED
05 JUL -7 AM 10:11
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TALLAHASSEE, FLORIDA

BK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SL INVESTMENTS, LLLP
(Name of Limited Partnership)

DOCUMENT NUMBER: _____

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRUCE C. ROSETTO
(Name of Person)

BLANK ROME LLP
(Firm/Company)

1200 NORTH FEDERAL HIGHWAY, SUITE 417
(Address)

BOCA RATON, FLORIDA 33432
and Zip Code)

For further information concerning this matter, please call:

BRUCE C. ROSETTO at (561) 417-8100
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

INHS66(9/03)



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 14, 2005

BRUCE C. ROSETTO
1200 N. FEDERAL HIGHWAY, STE. 417
BOCA RATON, FL 33432

SUBJECT: SL INVESTMENTS, LLLP
Ref. Number: W05000093678

05 JUL -7 AM 10:11
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE

We have received your document for SL INVESTMENTS, LLLP and your check(s) totaling \$1750.00. However, the document has not been filed and is being retained in this office for the following:

LIMITED PARTNERSHIP CERTIFICATE/APPLICATION BASIC FEES

Filing fees \$52.50 minimum - \$1750 maximum
Registered Agent Designation \$35

The filing fee is based on the total amount contributed and anticipated to be contributed by the limited partners as shown in the affidavit at a rate of \$7 per \$1000. The filing fee for an Application to Register a Foreign Limited Partnership is based on the total amount contributed by the limited partners allocated for the purpose of transacting business in the State of Florida at a rate of \$7 per \$1000.

Certified Copy	\$52.50
(15 pages or less, \$1 for each additional page after initial 15 pages)	
Registered Agent/Office Change	\$35
Name Reservation	
(120 days nonrenewable)	\$35
Amendment	
(other than specified)	\$52.50
Affidavit Decreasing Contributions	\$52.50
Affidavit Increasing Contributions	
\$7 per \$1000 on increase only	
(\$52.50 minimum-\$1750 maximum)	
Certificate of Status or Fact	\$8.75
Cancellation	\$52.50
Resignation of Registered Agent	\$87.50
LP Annual Report/Uniform Business Report	
\$7 per \$1000 of invested capital	
(\$52.50 minimum - \$437.50 maximum)	
plus Supplemental Fee of \$138.75	
Reinstatement	

(\$500 for each year or part thereof the
partnership was revoked plus the delinquent
annual report/uniform business report fees)
There is a fee of \$35.00 due.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 005A00046473

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SEC. OF STATE
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 07/21/2005

REF. #: 000699.40373

CORP. NAME: SL INVESTMENT FUNDS, LLLP

** File first **
Attn: Jason

FILED
05 JUL -7 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 513464 FOR \$ 35.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

05 JUL -7 AM 10:11
RECEIVED
TALLAHASSEE
STATE
FLORIDA

1. SL INVESTMENT FUNDS, LLLP
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 6132 PAYNE STEWART DRIVE, WINDERMERE, FL 34786
(Business address of Limited Partnership)
3. MITCHELL MENAKER
(Name of Registered Agent for Service of Process)
4. 6132 PAYNE STEWART DRIVE, WINDERMERE, FL 34786
(Florida street address for Registered Agent)
5. (SEE BELOW)
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 6132 PAYNE STEWART DRIVE, WINDERMERE, FL 34786
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2015

8. Name(s) of general partner(s): 6132 PAYNE STEWART DRIVE, WINDERMERE FL 34786
103000025629
GILES - MENAKER, LLC

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.


Signed this _____ day of JUNE, 2005.

Signature of all general partners:

General Partner

General Partner

General Partner

By: GILES - MENAKER, LLC


Mitchell Menaker, General Partner
Mr. Menaker is also signing to
accept his R.A. designation.

General Partner

General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of SL INVESTMENT FUNDS, LLLP

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ - 0 -

The total amount contributed and anticipated to be contributed by the limited partners at this time

Totals \$ 750,000 .

Signed this _____ day of JUNE, 2005 .

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

GILES – MENAKER, LLC

General Partner

By: _____
Mitchell Menaker , General Partner

General Partner

General Partner

General Partner

General Partner