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(Requestor's Name)

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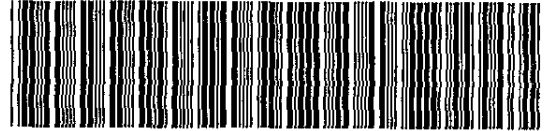
(Business Entity Name)

(Document Number)

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2005 AUG -4 AM 8:13
TALLAHASSEE, FLORIDA

W05 JUL 28 2005

J. BRYAN

AUG - 5 2005

DEWITT LAW FIRM, P.A.

37 NORTH ORANGE AVENUE
SUITE 840
ORLANDO, FLORIDA 32801

SHERRI K. DEWITT
ATTORNEY AT LAW

TELEPHONE NUMBER (407) 245-7723
FACSIMILE NUMBER (407) 650-1928

July 21, 2005

Department of State
Registration Section
P.O. Box 6327
Tallahassee, FL 32314


RE: Family Limited Partnership
JJAM Enterprise

To Whom It May Concern:

I have enclosed the Certificate and Agreement of JJAM Enterprises and Family Limited Partnership along with an additional copy so that I may have a certified copy returned to me for my records. Also enclosed please find the necessary check in the amount of \$1,971.25. Please issue the applicable file the appropriate papers. Thank you for your assistance in this matter

Please feel free to call me with any questions.

Sincerely,


Denise B. Rich
Office Manager / Paralegal

Encl

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 28, 2005

DENISE B. RICH, PARALEGAL
DEWITT LAW FIRM, P.A.
37 NORTH ORANGE AVENUE, SUITE 840
ORLANDO, FL 32801

SUBJECT: JJAM ENTERPRISES FAMILY LIMITED PARTNERSHIP
Ref. Number: W05000035814

We have received your document for JJAM ENTERPRISES FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1871.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Partnership Agreement is not filed with us,

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 405A00049113

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TALLAHASSEE, FLORIDA

CERTIFICATE OF FAMILY LIMITED PARTNERSHIP

1. JJAMS ENTERPRISES, a Family Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1684 Indian Dance Court, Maitland, Florida 32751
(Business address of Limited Partnership)
3. Sherri K. DeWitt
(Name of Registered Agent for Service of Process)
4. DeWitt Law Firm, P.A., 37 N. Orange Avenue, Suite 840, Orlando, Florida 32801
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1684 Indian Dance Court, Maitland, Florida 32751
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to dissolve is: Indefinite
8. Name(s) of general partner(s) _____ Street address: _____

| | |
|----------------------|---|
| <u>Lisa P. Rosen</u> | <u>1684 Indian Dance Court, Maitland, Florida</u> |
| _____ | <u>32751</u> |
| _____ | _____ |
| _____ | _____ |

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 20th day of JULY, 2005.

Signature of all general partners:



Lisa P. Rosen

General Partner

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

*The undersigned constituting all of the general partners of JJAMS ENTERPRISES a Florida
Family Limited Partnership, certify:*

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DIE, INC. REGISTRATIONS
TALLAHASSEE, FLORIDA

The amount of capital contributions to date of the limited partners is \$860,000.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$900,000.

Signed this 20th day of JULY, 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.*



Lisa P. Rosen

General Partner