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Reinstatement

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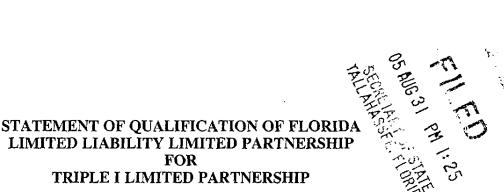
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August 31, 2005

SERVICES	CORPORATION	NAME (S) AND DOCUMENT NUMB	er (S
Triple I Limited Partnership, LLLP	(FILE SECOND)	The same	3/
Filing Evidence ☑ Plain/Confirmation Co	ру	Type of Document ☐ Certificate of Status	, 18 Co
☐ Certified Copy		☐ Certificate of Good Standing	
		□ Articles Only	
Retrieval Request Photocopy	· ·	 □ All Charter Documents to Incl Articles & Amendments □ Fictitious Name Certificate 	ude
□ Certified Copy		□ Other	
NEW FILINGS	AMENDMENT	S	
Profit	Amendment		
Non Profit	Resignation of F	A Officer/Director	
Limited Liability	Change of Regis	tered Agent	
Domestication	Dissolution/With	ndrawal	
X Other	Merger		
OTHER FILINGS	REGISTRATIO	N/QUALIFICATION	
Annual Reports	Foreign		
Fictitious Name	Limited Liability		
Name Reservation	Reinstatement		

Trademark

Other



TRIPLE I LIMITED PARTNERSHIP

Pursuant to Section 620.187, Florida Statutes, the below named limited partnership submits the following Statement of Qualification:

- The name of the partnership submitting this statement to register as a Limited Liability Limited Partnership is: Triple I Limited Partnership, a Florida Limited Partnership.
- 2. The address of the principal office of the partnership is:

700 Scenic Highway Frostproof, FL 33843

The name and Florida street address of the Registered Agent and registered office for service of process on the partnership is:

> Ben Hill Griffin, III 700 Scenic Highway Frostproof, FL 33843

- This partnership hereby elects to be a Florida limited liability limited partnership, and thereafter be known as: Triple I Limited Partnership, LLLP, a Florida limited liability limited partnership.
- 5. The effective date of the Florida limited liability limited partnership will be the date this registration is filed with the Florida Secretary of State.
- 6. All general partners and limited partners of the partnership have voted and approved the matters set forth herein.

SIGNATURES ON FOLLOWING PAGE

FURTHER, AFFIANTS DO NOT SAY.

GENERAL PARTNER:

Ben Hill Griffin, Inc., a Florida corporation

Printed Name: Keirh K. Wadsworth

STATE OF FLORIDA COUNTY OF POLK

I HEREBY CERTIFY that on the 30th day of August, 2005, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared Ben Hill Griffin, III, as CEO of Ben Hill Griffin, Inc., as general partner of Triple I Limited Partnership, who, after being by me first duly sworn, says upon Said person is personally known to me or has produced oath the above statements. as identification.

(SEAL) _

Notary Public

My Commission Expires: 04/16/2008

MARY KAY ROBERTS
Notary Public, State of Florida
My comm. expires April 16, 2008
Comm. No. DD298369