

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 JUL 10 AM 11:04

<b>DOCUMENT # A05000001934</b>				<b>SECRETARY OF STATE DIVISION OF CORPORATIONS</b> <b>06 JUL 10 AM 11:04</b>	
<b>1. Entity Name</b> <b>WHITTAKER FAMILY LIMITED PARTNERSHIP</b>					
<b>Principal Place of Business</b> 12000 N. BAYSHORE DRIVE, #108 N. MIAMI, FL 33181			<b>Mailing Address</b> 12000 N. BAYSHORE DRIVE, #108 N. MIAMI, FL 33181		
<b>2. Principal Place of Business</b> 1065 NE 125th STREET Suite, Apt. #, etc. 300		<b>3. Mailing Address</b> 1065 N.E. 125th STREET Suite, Apt. #, etc. 300			
<b>City &amp; State</b> NORTH MIAMI, FL		<b>City &amp; State</b> NORTH MIAMI, FL		<b>4. FEI Number</b> 07062006 Chg-LP CR2E003 (11/05)	
<b>Zip</b> 33161		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b> JONATHAN H. GREEN & ASSOCIATES, P.A. 799 BRICKELL PLAZA, SUITE 700 MIAMI, FL 33131			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> _____ <b>DATE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006</b>				<b>In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.</b>	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	WHITTAKER, HELEN 12000 N. BAYSHORE DRIVE, #108 N. MIAMI, FL 33181		<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	300077530203 07/14/06--01050--009 **500.00	
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>DOCUMENT #</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>			<b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		
<b>14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes</b>					
<b>SIGNATURE:</b> <u>Heleen R. Whittaker</u> <b>GENERAL PARTNER</b>			<b>7/6/06 (305) 895-7205</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		