

A05000002014

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000259038 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : AKERMAN SENTERFITT & EIDSON
Account Number : 076656002425
Phone : (407) 843-7860
Fax Number : (407) 843-6610

FILED
05 NOV -7 AM 11:40
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

05 NOV -7 AM 7:47
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP AMENDMENT

LIBERTY DR. PHILLIPS, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$105.00

W
11/08/05

Electronic Filing Menu

Corporate Filing

Public Access Help

20

H05000259038 3

**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:

LIBERTY DR. PHILLIPS, LLLP

Insert limited partnership's Florida document number: A05000002014

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLLP

3. The street address of its chief executive office: 310 West Central Parkway
(if different from current recorded address): Suite 7000
Altamonte Springs, Florida 32714

4. The street address of principal office in Florida: 310 West Central Parkway
Suite 7000
Altamonte Springs, Florida 32714

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:
☒ as of the date this document is filed with the Florida Secretary of State
or
☐ a date later than the time of filing: _____.

7. The name and Florida street address of the partnership's agent for service of process:

Liberty Dr. Phillips, Inc.
310 West Central Parkway, Suite 7000
Altamonte Springs, Florida 32714

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 31 day of October, 2005.

Signature of TWO Partners:

LIBERTY DR. PHILLIPS, INC.,
a Florida corporation

By: W. Michael Mikkelsen
W. Michael Mikkelsen, President

WEST SAND LAKE, INC., a Florida corporation

By: Stanley T. Pietkiewicz
Name: STANLEY T. PIETKIEWICZ
Title: PRESIDENT