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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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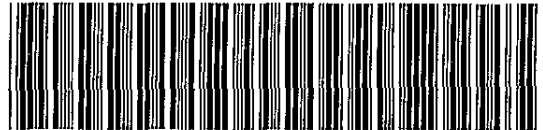
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. ARTHUR SCOTT, JR.

Attorney at Law
130 Nevermore Lane
Kingsport, TN 37664
423-288-7883 (phone)
888-224-1737 (fax)
tscott@chartertn.net
December 27, 2005
By Federal Express

Registration Section
Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Re: GAP (WV) Exploration, L.L.L.P.

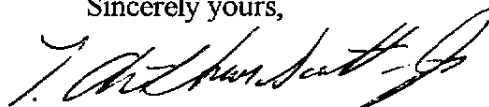
To Whom it May Concern:

In connection with the organization of the above limited liability limited partnership, please find enclosed the following:

1. Cover letter for GAP (WV) Exploration, L.L.L.P.
2. Statement of Qualification for GAP (WV) Exploration, L.L.L.P.
3. Cover letter for GAP (WV) Exploration, Limited Partnership
4. Certificate of limited partnership for GAP (WV) Exploration, Limited Partnership
5. Affidavit of Capital Contributions for GAP (WV) Exploration, Limited Partnership
6. My check for \$130.00, being \$70.00 filing fee, \$35.00 registered agent fee and \$25.00 filing fee for the LLLP.

If you have any questions, please contact me.

Sincerely yours,



Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GAP (WV) Exploration, Limited Partnership
(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:

T. Arthur Scott, Jr.
(Name of Person)

Attorney at Law
(Firm/Company)

130 Nevermore Lane
(Address)

Kingsport, TN 37664
(City/State and Zip Code)

For further information concerning this matter, please call:

T. Arthur Scott, Jr. at (423) 288-7883
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

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TALLAHASSEE, FLORIDA

**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:

GAP (WV) Exploration, Limited Partnership

Insert limited partnership's Florida document number: _____

or

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

2. The complete name of the entity after filing Statement of Qualification shall be:

GAP (WV) Exploration, L.L.L.P.
(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office:
(if different from current recorded address):

400 Flagship Drive, Suite 307
Naples, FL 34108

4. The street address of principal office in Florida:
(if different from above)

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:

Richard A. Counts
400 Flagship Drive, Suite 307
Naples, FL 34108, Florida _____

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 27th day of December, 2005

Signature of TWO Partners:

Richard A. Counts
T. Arthur Scott Jr.

Typed or printed names of partners signing above:

Richard A. Counts
T. Arthur Scott Jr.

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

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