

A13733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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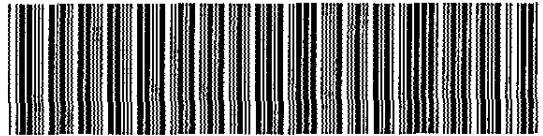
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY™

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ACCOUNT NO. : 072100000032

REFERENCE : 263324 4322524

AUTHORIZATION

*Patricia Pigato*

COST LIMIT : \$ 25.00

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

ORDER DATE : October 1, 2003

ORDER TIME : 10:24 AM

ORDER NO. : 263324-010

CUSTOMER NO: 4322524

CUSTOMER: Anna Krimshtein, Esq  
Katz Barron Squitero & Faust

7th Floor  
2699 South Bayshore Drive  
Miami, FL 33133

STATEMENT OF QUALIFICATION

NAME: JM ASSOCIATES, LTD., LLLP

EFFECTIVE DATE:

XX STATEMENT OF QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX            PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 1155

EXAMINER'S INITIALS: \_\_\_\_\_

**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:  
JM Associates, Ltd.

Insert limited partnership's Florida document number: A13733

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  
(LLLP, L.L.L.P.)

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

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:

Corpco, Inc.

2699 S. Bayshore Drive, 7th Floor

Miami, Florida 33133

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 29 day of September, 2003.

Signature of TWO Partners:

Michael D. Katz  
J. J. [Signature]

Typed or printed names of partners signing above: Michael D. Katz, Trustee  
Felicia Gervais

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

FILED  
OCT 2 2003  
SECRETARY OF STATE  
FLORIDA