

CORAL GABLES, FLORIDA 33143

RICHARD J. HORWICH IRA ZAGER

MITCHELL A. HORWICH FRANCINE HORWICH

TELEPHONE (305) 666-5299 FAX (305) 284-8())

September 15, 2000

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

MJA

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 100003401061-- 0 -09/21/00--01089--003 \*\*\*\*\*\*33.75

IN RE: Janmar Properties, Ltd.

## Gentlemen:

We file herewith Statement of Qualification for Florida Limited Liability Limited Partnership, together with a check of the partnership to the Florida Department of State in the amount of \$33.75 to cover the following:

Filing Fee \$25.00
Certificate of Status 8.75
Total \$33.75

Please forward the Certificate of Status to the undersigned rather than to the partnership.

Please call the undersigned if there is any question or further requirement.

Very truly yours

ICHARD J. HORWICH

RJH/adf Enclosure

cc: Mr. B.D. Rawls

00 SFP 20 MM In: 3

## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

. The name of the limited partnership as identified JANMAR PROPERTIES	d in the records of the Florida Department of State:  5. LTD.
Insert limited partnership's Florida document no or Attach certificate of limited partnership, affidav partnership filing fees.	umber: A 20898 vit of capital contributions and applicable limited
. Suffix adopted for the above named partnership:  ("Registered Limited Liability Partnership," "Limited Liab	: LLLP  ility Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP")
The street address of its chief executive office:_ (if different from current recorded address):	4649 Ponce de Leon Blvd. Suite 403 Coral Gables, Florida 33146
. The street address of principal office in Florida: (if different from above)	the same
The limited partnership hereby elects to be a lim	ited liability limited partnership.
The effective date of this filing shall be:  X as of the date this document is filed with or a date later than the time of filing:	TP 20 A
The name and Florida street address of the partress. Rawls  4649 Ponce de Leon Blvd	o g
he execution of this statement as a partner constitutat the facts stated herein are true.	, Florida 33146  utes an affirmation under the penalties of perjury
gned this 1446 day of September	<u>,–19</u> - 2000
	: by its vice-president / B.O. Pana nox Field: by Trustee / B.O. Rama
yped or printed names of partners signing above:	B.D. Rawls B.D. Rawls

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