A32239

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				

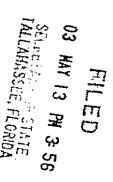




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FOLEY LARDNER

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If you have any questions, please do not hesitate to call. Thank you for all your assistance with this matter.

Sincerely,

Katherine Russell

Paralegal

Enclosures

005.291615.1

STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

1.	The name of the limited partnership as identified The Eagles Golf Club, Ltd.	in the records of the Florida	Department of State:	
	<u>Insert</u> limited partnership's Florida document nur	nber: A32239	÷**	
	Attach certificate of limited partnership, affidar partnership filing fees.	vit_of capital contributions	6	
2.	Suffix adopted for the above named partnership:_(LLLP, I		OS NAT	
2.5	Name of Partnership after filing this statement:	The Eagles Golf Club, LLLP	7 T	
3.	The street address of its chief executive office:	√ A	- 正元 梁 〇 - 正元 妥	
4.	The street address of principal office in Florida: N/A (if different from above)			
5.	The limited partnership hereby elects to be a limi	ted liability limited partnersl	hi p .	
6.	The effective date of this filing shall be: X 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 partne William A. Lambos	rship's agent for service of p	process:	
	16101 Nine Eagles Drive	-		
	Odessa , Fl	or <u>ida 33556</u>	:	
the	ne execution of this statement as a partner constitute e facts stated herein are true. gned this day of May, 2003.	es an affirmation under the p	enalties of perjury that	
Sig	gnature of TWO Partners: Workers Workers William	a. Sauloss		
Тур	ped or printed names of partners signing above: <u>T</u>	heodora Lambos, as Personal Rep	resentative of the Estate of	
	<u>C</u>	onstantine P. Lambos, General Pa	ertner	
	V	illiam A. Lambos, General Partne	er	