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TRANSMITTAL LETTER

Registration Section Division of Corporations

TO:

SUBJECT: LAWRENCE A. HEATON Ltcl. (Name of Limited Partnership)			
The enclosed Supplemental Affidavit and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
VIRGINAL H. KELLER (Name of Person)			
LAWFRACE A. HEAton Ltcl. (Firm/Company)			
20720 EAGLE Check Court (Address)			
Boca Rate N. FL 33498 (City/State and Zip Code)			
For further information concerning this matter, please call:			
LAURENCE A. HEATON at (561) 451-8172 (Area Code & Daytime Telephone Number) 3			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned gener	al partners of	
LAWRENC	F A. HEATON Ltd.	, a
	ership, executed this supplemental affidavit	
The total amount of the	e capital contributions of the limited partners	is:\$ <u>500,000</u> .60
This 14 day of	Marc H.	2005
FURTHER AFFIAN	T SAYETH NOT.	
Under penalties of per best of my knowledge o	jury, I declare that I have read the foregoing and belief.	and that the facts are true, to the
	General Partner(s)	
_		· · · · · · · · · · · · · · · · · · ·
_		7A. 0
	Fees: \$7 per \$1000, based on additional contributions Minimum \$ 52.50 Maximum \$1750.00	05 MAR 18 PM 12:
		IZ: 45 LORIDA

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314