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March 1, 2000

REPLY TO:

Merritt Island
e-mail address:
lspielvogel@deanmead.com

A93000001457

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-03/06/00--01080--001
*****77.50 *****77.50

Corporate Records Division
Florida Department of State
P. O. Box 6327
Tallahassee, Florida 32314

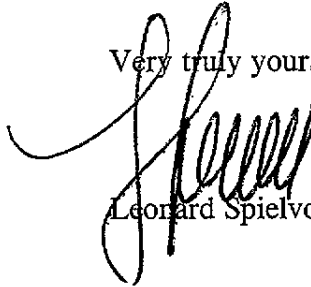
Re: 236 Properties, Ltd./Statement of Qualification for Florida Limited
Liability Limited Partnership
Our File No. 12379/21478

Gentlemen:

Enclosed herewith for filing with your office please find original and copy of
Statement of Qualification for Florida Limited Liability Limited Partnership on behalf of 236
Properties, Ltd., together with a check made payable to your order in the amount of \$77.50 in
payment of the requisite filing fee and the fee for a certified copy of the filed document.

Thank you for your assistance in this matter.

Very truly yours,


Leonard Spielvogel

FILED
00 MAR -6 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LS:RGN
Enclosures

cc: Client
(with enclosure)

F:\RNLTR\FLASECSTATE-LLLP QUALIFICATION STATEMENT

OA 3/10

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:
236 Properties, Ltd.

Insert limited partnership's Florida document number: A9300001457

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
("Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP")

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:
X as of the date this document is filed with the Florida Secretary of State
OR
_____ a date later than the time of filing: _____

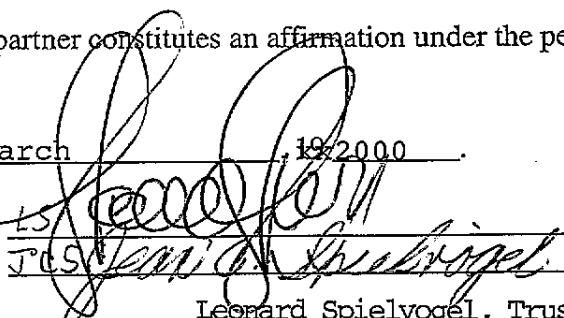
7. The name and Florida street address of the partnership's agent for service of process:
Leonard Spielvogel
101 S. Courtney Parkway, Suite 201
Merritt Island, Florida 32952

FILED
DO MAR - 6 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, 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 1st day of March, 192000

Signature of TWO Partners:


LS Leonard Spielvogel
JCS Jean C. Spielvogel

Typed or printed names of partners signing above:

Leonard Spielvogel, Trustee of the Leonard Spielvogel Revocable Trust, dated 9/4/97
Jean C. Spielvogel, Trustee of the Jean C. Spielvogel Revocable Trust, dated 9/4/97

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75