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February 18, 2000

200003141462--4--02/21/00--01102-002 \*\*\*\*\*25.00 \*\*\*\*\*\*25.00\_

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

Gentlemen:

Re: SALLS FAMILY LIMITED PARTNERSHIP

Enclosed herewith please find the Statement of Qualification for Florida Limited Liability Limited Partnership.

Also enclosed is our check in the amount of \$25.00 for your filing fee.

Please file the same and send written confirmation to the undersigned.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

Donald R. Hall ...

DRH:dk

Enclosures

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## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership as identified SALLS FAMILY LIMITED PARTNERS	ed in the records of the Florida Dep	
Insert limited partnership's Florida document num	ber: <u>A</u> 97000002487	
Attach certificate of limited partnership, affidavit of partnership filing fees.	of capital contributions and applica	ıble limited
2. Suffix adopted for the above named partnership ("Registered Limited Liability Partnership," "Limited Lia	bility Partnership," "R.L.L.P.," "L.L.P.," "R	LLP," or "LLP")
3. The street address of its chief executive office: (if different from current recorded address):	Same as current record	<del> </del>
4. The street address of principal office in Florida (if different from above)	Same	
5. The limited partnership hereby elects to be a lim		
<ol> <li>The effective date of this filing shall be:         <ul> <li>X as of the date this document is filed with or</li> <li>a date later than the time of filing:</li> </ul> </li> </ol>	·	. <u></u> .
7. The name and Florida street address of the parts  Wayne C. Salls	nership's agent for service of proce	
125 Meadows Drive	19ET 75'5 . T	
Tarpon Springs	Florida 34789	
The execution of this statement as a partner constituent that the facts stated herein are true.  Signed this	ntes an affirmation under the penal	ties of perjury
Signature of TWO Partners:	and January	<u> </u>
Typed or printed names of partners signing above:	Wayne C. Salls Dorothy E. Salls	
Filing Fee	e: \$25.00	10132. 27 (1000) 4 2
Certified Copy (o		÷ 2
Certificate of Status		P <sub>ap</sub> and

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