NTS FAMILY LIMITED PARTI		سعروانا	, ,,,,	Proc
	NERSHIP	42€		FILED
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Business	Mailing Address			02 JUN -5 AM 9: 38
OURTH FLOOR	4332 LIVE OAK BLVD.			SECRETARY OF STATE TALLAHASSEE, FLORIDA
	3. Mailing Address			
	Suite, Apt. #, etc.			
	City & State			DUE BY MAY 1, 2002
Country		- 		4. FEI Number 59-3469201 Applied For Not Applicable
	'	Cour	∩try 	5. Certificate of Status Desired S8.75 Additional Fee Required
INE K	it Registered Agent		Name Correc	Ction - RILEY. CHRISTINE C.
	•	-	Street Address	ss (P.O. Box Number is Not Acceptable)
FL 34685		1. J.		Tur!
	• -		City	FL Zip Code
o, typed or printed name of registered agent	nt and title if applicable. 10. Amount of Capi	pital Contrib		DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE
A GENERAL PARTNER T	in FLORIDA to C	date.		SEE REVERSE SIDE FOR FEE INFORMATION
GENERAL PARTNER		the form;	ii, aii aillendhei	ent must be filed to change a general partner.
OCUMENT / F9/000006305 CLEMENTS FAMILY CORPORATION 145 E. RICH ST., FOURTH FLOOR		STREET	EET ADDRESS	ADDRESS CHANGES ONLY
4809 ÚU 49519	/	CH1-S	ST-ZIP .	
ينها جمع المعمودين مورد الماق	A MANAGER AND STREET	STREET	et address	-06/10/0201081016
-		CITY-\$	ST-ZIP	****525.25 *****526.25
CUMENT / ME EET ADDRESS (-ST-ZIP.		STREE	ET ADDRESS	BK
		CITY-5	ST-ZIP	No.
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T ADONESS		STREET /	ADDRESS	and the second s
		CITY-ST	.T-ZIP	
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	distriction in the second			ection 119.07(3)(i), Florida Statutes. I further certify that the information nade under oath; that I am a General Partner of the limited partnership or
of or	Country Country Name and Address of Curren INE K BLVD. In FL 34685 Country Submits this statement for the statement of	A SEO. COURTH FLOOR COURTH FLOOR COURTH FLOOR A SUITE, Apt. #, etc. City & State Country City & State Country City & State Country City & State Country INE K BLVD. FL 34685 C entity submits this statement for the purpose of changing it in FLORIDA to in	A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUSTE: General Partners MAY NOT be changed on the form, GENERAL PARTNER INFORMATION GENERAL PARTNER INFORMATION E. RICH ST., FOURTH FLOOR IMBUS QH 43215 A STREET CITY-STREET	A SEO. COURTH FLOOR PALM HARBOR FL 34685 OF Business 3. Mailing Address Suite, Apt. #, etc. City & State Country Name and Address of Current Registered Agent Name COrrect Street Address PFL 34685 City d entity submits this statement for the purpose of changing its registered office or registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. In proper or printed name of registered agent and site if applicable. I