Repistor's Name Address City/State/Zip Phone

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1(Co | 1. (Corporation Name) | | ument #) | The season of |
|-------------------|-----------------------|---------------------------------------|-------------------------------------|--|
| 2 | | <u> </u> | | |
| (Co | rporation Name) | (Doc | Iment #) | |
| | rporation Name) | (Doct | 200033 -07/05/ ment #) ****38 | 3132026 0001079005 6.45 ****148.50 |
| 4(Co | rporation Name) | (Дост | ment #) | <u> </u> |
| Walk in | Pick up time | <u> </u> | Certified Copy | - |
| Mail out | Will wait | Photocopy | Certificate of Status | TALL SEC |
| NEW FILINGS | AMENDME | NTS | | FIL JUL -7 CRETARN LAHASSI |
| Profit | Amendment | | | |
| NonProfit | Resignation of R. | Resignation of R.A., Officer/Director | | |
| Limited Liability | Change of Regist | Change of Registered Agent | | 9: 05 STATE FLORID |
| Domestication | Dissolution/With | Dissolution/Withdrawal | | om o |
| Other | Merger | | | ٠ |
| | | | · · | |
| OTHER FILINGS: | REGISTR | | | |
| Annual Report | QUALITIC | AUIUN | CC. | \$148.50 |
| Fictitious Name | Foreign | | · | 140. |
| Name Reservation | Limited Partnersh | uip | | A 40 |
| | Reinstatement | | | |
| | Trademark | | · | |
| | Other | | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 14, 2000

EPM #2, LTD. 3950 3RD STREET NORTH, UNIT D ST. PETERSBURG, FL 33709

SUBJECT: EPM #2, LTD. Ref. Number: A9900000807

We have received your document for EPM #2, LTD. and your check(s) totaling \$237.95. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 620, Florida Statutes, requires a supplemental affidavit to be filed pursuant to section 620.112 or 620.176, Florida Statutes, any time the actual contributions of the limited partners exceed the anticipated amount of capital contributions on file with this office.

The fee to file the supplemental affidavit is \$148.50 and the fee to file the annual report/uniform business report is \$237.95. The total fee due for both filings is \$386.45. Please return the supplemental affidavit and the annual report/uniform business report together with the appropriate fee.

Please return your document, along with a copy of this letter, within 30 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 400A00034011

Cheek enclosed 6/26/00

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

| The undersigned general partners of | |
|--|----------------------|
| , a | - |
| Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes. | |
| The total amount of the capital contributions of the limited partners is: $\frac{21,314.37}{}$. | |
| This <u>26</u> day of <u>JUVE</u> , 19 <u>2000</u> . | - |
| FURTHER AFFIANT SAYETH NOT. | |
| Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief. | |
| General Partner(s) | |
| Jak K ample TALLAHA | k i sasan Sangara |

Fees:

\$7 per \$1000, based on additional contributions

Minimum \$ 52.50 Maximum \$1750.00

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