

BO1000000266

CORPORATION(S) NAME

Latin American Investement Partners, LP

300004519543--2
-08/06/01--01033-029
*****87.50 *****87.50

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input checked="" type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 AUG -6 PM 2:39
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

8/6/01

Order#: 470798

FILE SECOND

Ref#: _____

Amount: \$ _____

BK

FILED
01 AUG -6 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. Latin American Investment Partners, LP
(Name of limited partnership as it is in the home state)

2. Latin American Investment Partners, Limited Partnership
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware 4. July 27, 2001
(State of Formation) (Date of Formation)

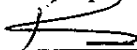
5. C T Corporation System
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)

Plantation, Florida 33324
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

C T Corporation System



**PATRICIA A. CANARIO,
SPECIAL ASSISTANT SECRETARY**

(Agent must sign on this line)

8. _____

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

Latin American Partners, LLC 101 E. Kennedy Blvd. (Suite 3300), Tampa, FL 33602

MO100001765

10. Latin American Investment Partners, LP, 101 E. Kennedy Blvd. (Suite 3300), Tampa, FL 33602
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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AUG -6 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Latin American Investment Partners, LP, 101 E. Kennedy Blvd. (Suite 3300), Tampa, FL 33602

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 30th day of July, 2001

David A. Burns
General Partner

STATE OF Florida

COUNTY OF Hillsborough

By: Latin American Partners, LLC,
a Delaware limited liability company, its General Partner;
By: CEA Global Partners, LLC,
a Delaware limited liability company, its Managing Member;
By: David A. Burns, President

On this 30th day of July, 2001

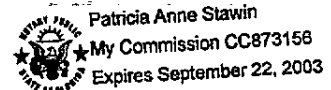
David A. Burns personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Patricia Anne Stawin
(Notary Public Signature)

PATRICK A ANNE STAWIN
(Notary's Printed Name)



Seal

My Commission Expires: 9/22/2003

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME the undersigned personally appeared _____,
a general partner of Latin American Investment Partners, LP, a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 10.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 10.00.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 30th day of July, 2001.


General Partner

By: Latin American Partners, LLC,
a Delaware limited liability company, its General Partner;
By: CEA Global Partners, LLC,
a Delaware limited liability company, its Managing Member;
By: David A. Burns, President

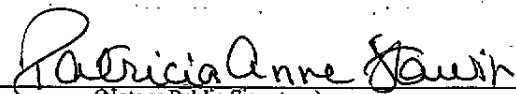
STATE OF Florida
COUNTY OF Hillsborough

On this 30th day of July, 2001.

David A. Burns, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____


(Notary Public Signature)

PATRICIA ANNE STAWIN
(Notary's Printed Name)



Patricia Anne Stawin
My Commission CC873158
Expires September 22, 2003

Seal

My Commission Expires:

9/22/2003