B02000000213

Tesco L.P.

Memo

To: Secretary of State, State of Florida

Division of Corporations

From: Chuck-800-699-5824

Re: Foreign Limited Partnership

600005729466--6 -65/10/02-01066--007

*****35.00 *****35.00

600005729456—-5 -06/10/02--01086--008

*****52.50 *****52.50

Enclosed is the appropriate documentation and fees for registering with the State as a Foreign Limited Partnership. Upon completion of our package, kindly forward a copy of our registration to

Ellen Potts

State Purchasing-State of Florida

4050 Esplanade Way-Suite 315

Tallahassee, fl 32399-0950

600005729466---6 -06/10/02--01086--009 ******8.75 ******8.75

Although I believe everything is in order, please don't hesitate to contact us should there be anything additional you may need. Thank you for your prompt attention to our request.

2002 JUN 10 AM 9: 51

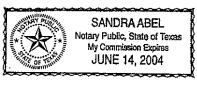
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

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

I. Jesco L.P.	
1. Seco L.P. (Name of limited partnership as	it is in the home state) ip proposes to register or transact business in Florida. ITED" or "LTD.")
2.	· · · · · · · · · · · · · · · · · · ·
(If name is unavailable, name under which the limited partnersh must contain the word "LIM"	TO M.
3. (State of Formation) 4.	(Date of Formation)
(State of Formation)	(Date of Formation)
5. WALTER POSUS TA (Name of Registered Agent for	Coming of Decoard
(Name of Registered Agent for	Service of Processy
6. 1275 Belcher tol. (Street Address of Regi	· Vul36 stered Office)
7 1	DU CAR
Duneding (City)	Florida 5469 (
(City)	(Zip Code)
7. Acceptance by the Registered Agent for Service of Process: Agent must signon	this line)
8. P 8500 L.P.	
8. VXSG C.V.	
(Address of registered office required in state of formatio	(77818
(Address of registered office required in state of formatio	n or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
Norman Kiacke	201 DUERR DA BELLVILLE, TY 77418
DEWNIZ ROTHER	4910 Fine STOWE DR. COLLEGE STOTLOW, BY 77845
Corry ROTHER	3661 Misry Creek Dr. Austril TX 78735
10. Ussed (1025 E. Hacienda (Breed) (Office where Names, Addresses and Contribu	itions 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.

12. 1035 E. HALIENDA
BECCUICLE TY. (Mailing Address of Limited Partnership)
(Maining 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.
Signed this 22 rd day of May General Partner General Partner
STATE OF Texas VORMAN Kiecke
COUNTY OF Austin
On this 22 nd day of may, 2002.
Norman Kiecke , personally appeared before me,
who is personally known to me
whose identity I proved on the basis of
Rotary Public Signature)
SANdra Abal (Notary's Printed Name)
Seal My Commission Expires: 6-14-2004



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared	Mormal	Kise	: E,	
a general partner of Sisco CP	, a	a (an)	12145	
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:				
1. The amount of capital contributions of the limited partners				
2. The anticipated amount of the capital contributions of the litransacting business in Florida is \$	imited partners th	at are alloo	cated for the purposes of	
Under the penalties of perjury I, being duly sworn, declare the	at I have read the	foregoing	and know the contents thereof and	
that the facts stated herein are true and correct.			~ ~	
Signed this 22nd day of May	<u>2002</u> .		A STATE OF THE STA	
Sener NOR MAN	al Partner Kiecke		SEE, FLORIDAS	
STATE OF Texas		-		
COUNTY OF Austin		-		
On this 22 nd day of Ma	Ή		, <u>2002</u> ,	
Norman Kiecke		nally appe	ared before me,	
who is personally known to me whose identity I proved on the basis of				
Motary Public Signature)	_:			
S-ANDRA ALL (Notary's Printed Name)	-			

My Commission Expires: 6-14-2004

SANDRA ABEL
Notary Public, State of Texas
My Commission Expires
JUNE 14, 2004