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To:

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From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850)521-1000  
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**FOREIGN LIMITED PARTNERSHIP**  
**VIGO FINANCIAL SERVICES, L.P.**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$1,785.00

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

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1. Vigo Financial Services, L.P.  
(Name of limited partnership as it is in the home state)

2. \_\_\_\_\_  
(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. April 30, 2004  
(State of Formation) (Date of Formation)

5. Corporation Service Company  
(Name of Registered Agent for Service of Process)

6. 1201 Hays Street  
(Street Address of Registered Office)

Tallahassee Florida 32301  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:  
Cynthia L. Harris **Cynthia L. Harris**  
(Agent must sign on this line) **as its agent**

8. Corporation Service Company  
2711 Gontersville Road, Suite 400 Wilmington, DE 19808  
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
#F04000003445  
Vigo GP, Inc. 1300 Sawgrass Corporate Parkway, Suite 110  
Sunrise, FL 33323

10. 1300 Sawgrass Corporate Parkway, Suite 110 Sunrise, FL 33323  
(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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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12. 1300 Sawgrass Corporate Parkway, Suite 110 Sunrise, FL 33323

(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.

Signed this 16th day of June 2004

Steve Sapp, Treasurer of Vigo GP, Inc., its General Partner

STATE OF Florida

COUNTY OF

On this 16th day of June 2004

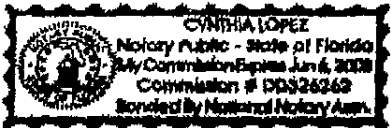
Steve Sapp, Treasurer of Vigo GP, Inc., its General Partner personally appeared before me,

who is personally known to me

whose identity I proved on the basis of

Cynthia Lopez (Notary's Printed Name)

Seal My Commission Expires: 6-6-08



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

BEFORE ME the undersigned personally appeared Steve Sapp, Treasurer of Vigo GP, Inc., its General Partner,  
a general partner of Vigo Financial Services, L.P., 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 \$ 16,905,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 16,905,000.

*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.*

Signed this 16th day of June, 2004.

Steve Sapp  
General Partner  
Steve Sapp, Treasurer of Vigo GP, Inc., its General Partner

STATE OF Florida

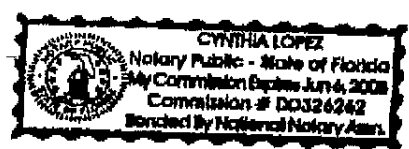
COUNTY OF \_\_\_\_\_

On this 16th day of June, 2004

Steve Sapp, Treasurer of Vigo GP, Inc., its General Partner, personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of \_\_\_\_\_

Cynthia Lopez  
(Notary Public Signature)  
Cynthia Lopez  
(Notary's Printed Name)



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