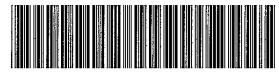
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2006 JAN 11 P 2: 1

SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Henson Family Ho	ldings, LLLP
		hip or Limited Liability Limited Partnership)
limited		atus and fees are submitted to register a foreign nited partnership to transact business in Florida. ing this matter to:
Ro	land D. Waller	
	(Contact Person)	
Wa	ller, Mitchell & Barnett	
	(Firm/Company)	
533	2 Main Street	
	(Address)	
Nev	w Port Richey, FL 346	52
	(City, State and Zip Code))
T		
For fu	rther information concerning this m	natter, please call:
Par	n Aiello	_{at (} 727) 847-2288
	(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclos	sed is a check for the following amo	ount:
(\$965 F	00.00 Filing Fees Status S1,008.75 Filing Fee and Certificate of Status	and Certified Copy Certificate of Status MAILING ADDRESS:
Regist Divisio Cliftor	ET ADDRESS: ration Section on of Corporations n Building Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301



January 3, 2006

ROLAND D. WALLER WALLER, MITCHELL & BARNETT 5332 MAIN STREET NEW PORT RICHEY, FL 34652

SUBJECT: HENSON FAMILY HOLDINGS, LLLP

Ref. Number: W06000000092

We have received your document for HENSON FAMILY HOLDINGS, LLLP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

I'm sorry when I called you last week I wasn't aware of all the changes in Florida Statutes 620. I'm enclosing the new application and I ask that you complete it since so much has changed. Again I'm sorry for this inconvenience.

Please return your document, along with a copy of this letter, within 60 pays your filing will be considered abandoned.

If you have any questions concerning the filing of your document, plesse carrell (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 506A0000 202 ...

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

Henson Family He			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(Name of Limited Partnership or L Acceptable Limited Partnership suffixe, Acceptable Limited Liability Limited Po or LLLP.	s: Limited Partnershi	p, Limited, I	L.P., LP, or Ltd.		
(If name unavailable, name under w	hich the limited partn sact business in Floric	ership or lin	nited liability limite tain acceptable suff	ed partnership	
2. Georgia	3.	Janua	ary 18, 2000 _	 =	
(State or Country of Format	ion)	(Date o	of Formation)		,
л Ja	ne H. Gumbine	:r			
(Name of I	Registered Agent for S	Service of Pr	ocess)		
5 911	4 Turkey Shoo	t Rd.			
(Florida	a street address for Re	gistered Ago	ent)		
New Port	t Richey	, Florida	34654		
6. I hereby accept the appointment as comply with the provisions of all statut and I am familiar with an accept the object.	es relative to the prop	er and comp	olete performance o	further agree to of my duties,	
R Jan N. La (Agent must sign of	on this line) Jane	ree/J	leas.	······································	
(zigent must sign (with the Jane	u. Gampi	ner, secreta	ry/ reasur	er
79	114 Turkey Shoo		<u> </u>	<u> </u>	
	(Principal office ad	•		CRET	7
New	Port Richey, I	FL 3465	4	[0] Z	- E
8. If limited partnership is a lim	ited liability limite	ed partners	hip, check box	1 7 2: SEE, FLOG VI	C
	Page 1 of 3	ŀ		資訊 元	

9. 9114 Turkey Shoot Rd.		
(Mailing a New Port Riche		
10. Name, principal office address, and mailing		
lenson Management Services, Inc.	9114 Turkey Shoot Rd.	
(Name) F05 -6883	(Street Address) —— New Port Richey, FL 34654	
	(Mailing Address)	
(Name)	(Street Address)	
_	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	
(Name)	(Street Address)	
_	(Mailing Address)	
Page 2	STATE CORIDA	

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
	•
11. Effective date, if other than the date of fil	ing:
(Effective date cannot be prior to nor filed by the Florida Department of Sta	more than 90 days after the date this document is ate.)
to the delivery of this application to the	nce duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of of the entity's records in the jurisdiction under the
Signed thisday of	December 2005.
Jane H. General Partner J	The Jack Secretary/Trespreix
Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent (\$26) \$52.50 \$8.75

Page 3 of 3

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0003046
DATE INC/AUTH/FILED: 01/18/2000
JURISDICTION : GEORGIA
PRINT DATE : 11/16/2005
FORM NUMBER : 211

JAMES, BATES, POPE & SPIVEY, LLP JENNIFER MYERS 438 COTTON AVENUE MACON, GA 31201

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

HENSON FAMILY HOLDINGS, LLTI A GEORGIA LIMITED PARTNERSHIP

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above named entity as of the print date above. It does not certify whether con not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed to pending with the Secretary of State.

This information is electronically transmitted, issued and Tcertified in accordance with the Georgia Electronic Records and Signatures Act, and fitle 14 of the Official Code of Georgia Annotated and is prima-facie widence that said entity is in existence or is authorized to transact business Iff the state.

20051116223221092



Cathy Cox Secretary of State