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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

S-HD. MM, F	LP, Limited		THE LAND OF THE PARTY OF THE PA
pliane lile (i)			Art of Inc. File
Signature			Fictitious Owner Search Vehicle Search Driving Record
Requested hu			Driving Record UCC 1 or 3 File
Requested by:	Lollalou	<u> 10:30</u>	UCC 11 Search
Name	Date	Time	UCC 11 Search
Walk-In	Will Pick Up		Courier

क्षा भी जिल्ला स्वरंग के <mark>क्रमान विद्</mark>यात है। एक क्षेत्र के का भी जिल्ला के क्रिकेट के सामान्यकार है। जिल्लाक क्ष

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

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP	1
TO TRANSACT BUSINES IN FLORIDA	
S-HD.MM, FLP, Limited	6 10
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include sufficient Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P., or LLLP.	TIED RELEASE
(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)	
_{2.} Texas _{3.} October 27, 2005	
(State or Country of Formation) (Date of Formation)	
Lapital Connection, Inc.	
(Name of Registered Agent for Service of Process)	
5, 417 E Virginia St # 1	
(Florida street address for Registered Agent)	
Tallahassee, FL 32302	
6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.	
Signature of Registered Agent	
_{7.} 3601 Vineland Rd, Suite 14	
(Principal office address)	
Orlando, FL 32811	
3. If limited partnership is a limited liability limited partnership, check box	

(Mailing address) 10. Name, principal office address, and mailing address of each general partner:		
(Name)	Richardson, Texas 75080	
	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
. Effective date, if other than the date of filing	·
	ore than 90 days after the date this document is
Effective date cannot be prior to nor meded by the Florida Department of State 2. Attached is a certificate of existence the delivery of this application to the	ore than 90 days after the date this document is

Page 3 of 3

\$52.50 \$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees: Certified Copy (optional): Certificate of Status (optional):

Roger Williams Secretary of State

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697

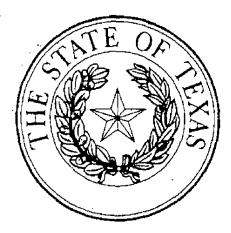


Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for S-HD.MM, FLP (filing number: 800563408), a Domestic Limited Partnership (LP), was filed in this office on October 27, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 08, 2006.



Roger Williams Secretary of State