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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 8, 2005

MICHAEL J. PORRO 180 OLD TAPPAN ROAD, BLDG. 5 OLD TAPPAN, NJ 07675

SUBJECT: MICHAEL J. PORRO & CO. FINANCIAL ADVISORS, L.L.C.

Ref. Number: W05000017847

We have received your document for MICHAEL J. PORRO & CO. FINANCIAL ADVISORS, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

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

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

TÄLLAGAGA

Letter Number: 105A00024132

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OCALA PARTNERS LIMITED (Name of Limited Liab	PARTNER SHIP pility Company)
The enclosed "Application by Foreign Limited Liability Co Florida," Certificate of Existence, and check are submitted liability company to transact business in Florida	
Please return all correspondence concerning this matter to t	he following:
MICHAEL J. / (Name of Pe	Ponno, rson)
MICHAEL J. PORRO (Firm/Comp	E CO FINANCIAL ADVISORS LLC Dany)
180 OLD TAPPAN ROAM	BLOG 5
OLD TAPPAN NJ (City/State and Z	07675 (ip Code)
For further information concerning this matter, please call:	FLORAL S
MICHAEL MARINELLO at (Armonia of Person) (Armonia of Person)	201 768-0218 ea Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	

□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate
Certificate of Status Certified Copy of Status & Certified Copy

□ \$125.00 Filing Fee

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIC LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	JN
1. MICHAEL J. PORRO & Co. FINANCIAL ADVISORS LLC (Name of Foreign Limited Liability Company)	
(Name of Foreign Limited Liability Company)	
2. State of New Jeasey (Jurisdiction under the law of which foreign limited liability) (FEI number, if applicable)	
company is organized)	
4. September 9, 2002 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6 Nove Year	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 180 OLD TAPPAN ROAD, BLAG 5	
OLO TAPPAN, NJ 07675 (Street Address of Principal Office)	
(Succession Finisher Office)	
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	لشس. ق م
@ MICHAFL J. PORRO 180 OLD TAPPEN RJ-	
OVOTAPHU NT OTEX	- H
1 HUBERT BILL & LAKESIDE DR. OCALA, FC. 34	48
668	0
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in	n
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	
	-
LAND PURCHASE & POSSIBLED DEVELOPMENT	
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes	
an affirmation under the penalties of perjury that the facts stated herein are true.)	
MICHAEL J. PORRO	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
MICHAEL J. PORRO & CO FINANCIAL HOVISORS, LLC
2. The name and the Florida street address of the registered agent and office are:
HUBERT E. BALL (Name)
Florida Street Address (P.O. Box NOT ACCEPTABLE)
OCALA FL 34482-6660 City/State/Zip
Having been named as registered agent and to accept service of process for the above stated limited, liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)

\$ 100.00 Filing Fee for Application

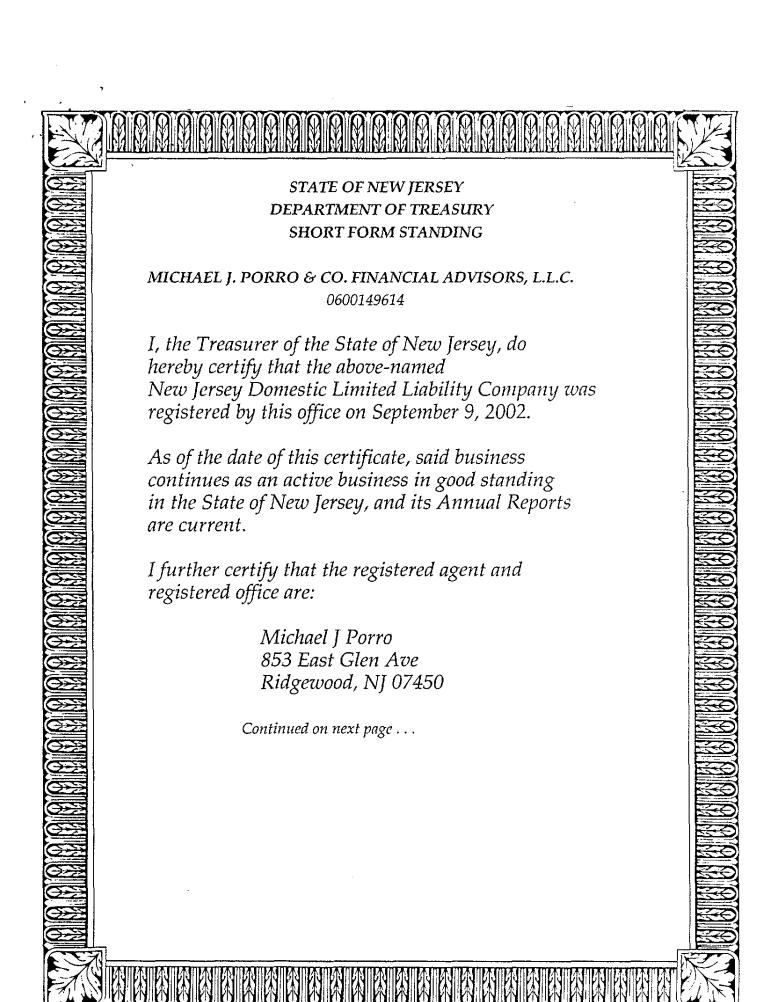
\$ 30.00 Certified Copy (optional)

\$ 25.00

\$ 5.00

Designation of Registered Agent

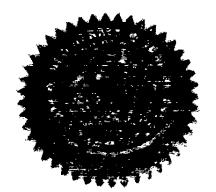
Certificate of Status (optional)





DEPARTMENT OF TREASURY SHORT FORM STANDING

MICHAEL J. PORRO & CO. FINANCIAL ADVISORS, L.L.C.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 22nd day of March, 2005

John E McCormac, CPA State Treasurer