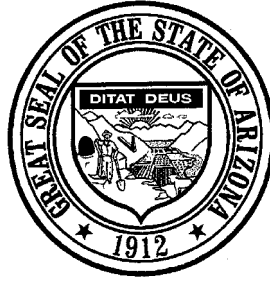


Ken Bennett
Secretary of State
Limited Liability Partnerships
1700 W. Washington, 7th Fl.
Phoenix, Arizona 85007



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SUBMIT IN DUPLICATE with a self addressed stamped envelope.

All correspondence regarding this filing will be sent to principal office.

**STATEMENT OF FOREIGN QUALIFICATION OF A
FOREIGN LIMITED LIABILITY PARTNERSHIP**

ARS § 29-1106

Name of Foreign Limited Liability Partnership (end with "Limited Liability Partnership" or "LLP")

The state and date of formation Authorizing agency (optional) Registration number (optional)

Name of Agent for Service of Process Phone Number

Arizona Address of Agent (PO Box and C/O are not acceptable) City Arizona Zip

The address of the chief executive office used by the Limited Liability Partnership in this state (**IF ANY**):

Address (PO Box and C/O are not acceptable) City Arizona Zip

The address of the office to be maintained in the state of organization:

Address City State Zip

A delayed effective date, if any: _____

Signature of General Partners:

Signature Print Name Date

Signature Print Name Date

**** An affidavit evidencing publication shall be filed with Secretary of State within ninety days after filing of the statement of qualification. (Filing Fee \$3.00)