PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.								
	FORGO STATEMENT	A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State invision of conponations		APPROVED AND FILED				
DOCUMENT # 719348 1. Corporation Name EMERALD GREEN SECTION TWO, INC.					1997 SEP 22 AM 9: 31 SECRETARY OF STATE TALLAHASSEE. FLORIDA			
Principal Pi	ace of Business (eyser Avenue, Villa 2700d, Florida 33021	Mailing Add	ress				LONIDA	
2. New Pri	iddresses are incorrect in any way, line the ncipal Office Address, If Applicable		g Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 9/18/70			
Suite, Apt. #, etc. City & State		Suite, Apt. #	Suite, Apt. #, etc. City & State		5. FEI Number Applied For 59-1402599 Not Applied be			
Zip	Country	Zip	Countr	у	- 6. CERTIFICAT	E OF STATUS DESIRED	S8.75 Additi	onal Fee required
7. Names a	and Street Addresses of Each Officer and	d/or Director (Fig	rida nonprofit corpora	ations must list at te	east 3 directors)		<u>.</u>	
	Name of Officers		Str	eet Address of Ead	ch			
Title(s) 1	and/or Directors		Of 3 (Do NOT Us	ficer and/or Directo se Post Office Box	or Numbers)	4	City / State / Zip	
P/D	Edwin Geller		3501 Keyse			Hollywood,	Florida	33021
VP/D	Frances Greif		3501 Keyse	r Avenue,	V111a 30	Hollywood,	Florida	33021
s/D	Beatrice Weinberg		3501 Keyse	r Avenue,	Villa 20	Hollywood,	Florida	33021
T/D	T/D Helen Beloff		3501 Keyse	r Avenue,	Villa 30	Hollywood,	Florida	33021
				R	EINST	ATEMEN	ITO A	3/01
	8. Name and Address of Current	Registered Age	J		9. Name and A	Address of New Regi	stered Agent	
Edwin Geller 3501 Keyser Avenue,				Name Street Address (P.O. Box Number	000023 -09/23/	3 0148 970109	67 6-002 ***61.25 67
Villa 28							1,25 ###	Name
Hollywood, Florida 33021				Suite, Apt. #, Etc	151		97~-01098 0.500 Zava	3003
10. I, being Signature of Registered A	Agent William T	eller		th and accept the c	obligations of Section	1	19197	
11. Dở De	es this corporation pay a pt. of Revenue under S.	any intang	ible tax to th Florida Statu	e utes. Yes	No.⊠	(See o	other side for infor on intangible tax.	
owed by	that I am an officer or director or the rece statement application, the reason for diss the corporation have been paid and the application is true and accurate, and my significant	olulion has been names of individ:	eliminated, the corpor uals fisted on this forn	rate name satisfies n do not qualify for	the requirements an exemption und	of section 607 0401 or	2170401 E.C.	that all face
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #								

SIGNATURE: