

A0300000006

(Requestor's Name)

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11/10/06--01027--0111 **1802.50

(Business Entity Name)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE
SECURITY BUREAU
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 11/10/2005

REF. #: 000151.44278

CORP. NAME: JACARANDA TRAIL II, LTD.

ARTICLES OF INCORPORATION ARTICLES OF AMENDMENT ARTICLES OF DISSOLUTION
 ANNUAL REPORT TRADEMARK/SERVICE MARK FICTITIOUS NAME
 FOREIGN QUALIFICATION LIMITED PARTNERSHIP LIMITED LIABILITY
 REINSTATEMENT MERGER WITHDRAWAL
 CERTIFICATE OF CANCELLATION
 OTHER: SUPPLEMENTAL AFFIDAVIT

STATE FEES PREPAID WITH CHECK# 514882 FOR \$ 1802.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

CERTIFIED COPY CERTIFICATE OF GOOD STANDING PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

Examiner's Initials

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SECURE STATE
TALLAHASSEE, FLORIDA

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**SUPPLEMENTAL AFFIDAVIT
OF CAPITAL CONTRIBUTIONS OF
JACARANDA TRAIL II, LTD.**

STATE OF FLORIDA)
) SS.
COUNTY OF MIAMI-DADE)

Pursuant to Section 620.112 of the Florida Revised Uniform Limited Partnership Act, the undersigned, as the sole general partner of JACARANDA TRAIL II, LTD., a Florida limited partnership (the "Partnership"), upon being duly sworn, deposes and says:

1. The aggregate capital contributions made by the Limited Partner of the Partnership to the Partnership is \$ 7,099,000.00

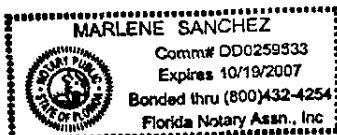
2. It is not anticipated that the Limited Partner will make any additional contributions to the capital of the Partnership other than as set forth in Number 1, above.

DATED: November 8, 2005

JACARANDA TRAIL II, LLC, a Florida limited liability company, as sole general partner

By: Lloyd Boggio, Manager

The foregoing instrument was acknowledged before me this 2 day of November, 2002, by Lloyd Boggio, as Manager of JACARANDA TRAIL, LLC, a Florida limited liability company, on behalf of the company. He is personally known to me or has produced a driver's license as identification and did take an oath.



Print or Stamp Name:
Notary Public, State of Florida at Large
Commission No.: _____
My Commission Expires: _____