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DATE 04-23-02

_ Telephone Number __305-444-2363

LIMITED 02 APR 29 PM 2: 38 **PARTNERSHIP** Secretary of State REINSTATEMENT SECRETARY OF STATE TALLAHASSEE; FLORIDA DIVISION OF CORPORATIONS DOCUMENT # A96000001762 1. Name of Limited Partnership RSL Finance Limited Partnership II 2. Principal Office Address 3. Mailing Office Address 4. Date Formed or Registered 169 Miracle Mile 169 Miracle Mile To Do Business in Florida 09-24-96 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For The Colonnade, Suite R-40 The Colonnade, Suite R-40 65-0696987 Not Applicable City & State City & State \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status Coral Gables, Florida Coral Gables, Florida 7a. Capital Contributions as shown on Record: Zio Country Country \$1,000,000.00 33134 USA 33134 USA 76. Amount of Capital Contributions in FLORIDA to date: . 8. Name and Address of Current Registered Agent \$1,000,000.00 Name FEES: Roland R. St. Louis, Jr. Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, Street Address (P.O. Box Number is Not Acceptable) for each year due this office. 169 Miracle Mile Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. Suite, Apt. #, Etc. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. The Colonnade, Suite R-40 Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee. City State Zip Code Coral Gables 33134 ned limited partnership Pursuant to the provisions of sections 620,1051 and 620,192, Florida Statutes, anized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or worth, in the State agent. I am familiar with, and accept the obligations of section 620, 92, Florida Statutos. rized by its general partner(s). I hereby accept the appointment of registered SIGNATURE (Registered Agent Accepting Appointment) DATE 04-23-02 A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Registration Document Number 10a. Name(s) of General Partner(s) City, State and Zip Code (Do NOT Use Post Office Box Numbers) RSL Holdings, Inc. 169 Miracle Mile Coral Gables; Florida P96000058665 Apm-1000.00 Ar 875.00 -Arwap 177.50 800005482508 -05/07/02--01090--023 PENSTATEMENT 2001-2000 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 13.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my sideature shall live the similar part is true and accurate and that my sideature shall live the similar part is true and accurate and that my sideature shall live the similar part is true and accurate and that my sideature shall live the similar part is find and the sideature shall live the sideature of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 62/ Florids Statutes.

RSL Holdings, Inc., by Roland R. St. Louis, Jr.

SIGNATURE