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COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	Living Water Fund II, LP			
-	(Name of Fo	oreign Limited Part	nership)	
Dear Sir or M	ladam:			
The enclosed	application, affidavit and fe	ce(s) are submitted	for filing.	
Please return	all correspondence concern	ing this matter to t	he following:	
Cynthia M. Ho	endzel, Legal Assistant			
	(Name of Person)			
Sugar, Friedbe	erg & Felsenthal LLP			
	(Firm/Company)			
30 N. LaSalle	Street, Suite 3000			
	(Address)			
Chicago, IL 60	0602			
	(City/State and Zip Code	e)	 	
For further in	formation concerning this r	natter, please call:		
		212	704.0400	
Cynthia M. H	endzel (Name of Person)	at (312)	Daytime Telephone Number)	
'	(wante of Ferson)	(Area Code &	Daytime receptione (valueer)	
STREET/CO Registration S	DURIER ADDRESS:		NG ADDRESS:	
Division of C			n of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301

P.O. Box 6327 Tallahassee, Florida 32314

050EC 29 AMII: 46

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

State State

Living Water Fund II, LP	
(Name of limited)	partnership as it is in the home state)
ı.	
(If name is unavailable, name under which the Florida; must conta	e limited partnership proposes to register or transact business in ain the word "LIMITED" or "LTD.")
Delaware (State of Formation)	4. December 6, 2005 (Date of Formation)
Robert Jenkins	
(Name of Registered Ager	nt for Service of Process)
340 Giralda Avenue, Suite 817E	
(Street Ac	ddress of Registered Office)
Coral Gables	, Florida 33134
(City)	(Zip Code)
. Acceptance by the Registered Agent for Service Composition Servi	<u> </u>
340 Giralda Avenue, Suite 817E, Coral Gab	les, FL 33134
	STATE OF THE STATE
(Address of registered office required in sta	ite of formation or, if not required, address of principal office.)
. NAMES OF GENERAL PARTNERS	STREET ADDRESS
Robert Jenkins Trading LLC,	340 Giralda Avenue, Suite 817E, Coral Gables, FL 33134
9 mo4-465	
	-
0. 340 Giralda Avenue, Suite 817E, Coral Ga	
(Office where Names, Addresse	s and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or

withdrawn.

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₹	

12. 340 Gira	alda Avenue, Suite 817E, Coral Gables, FL 33134			
	•			
	(Mailing Address of Limited Partn	ership)		
	of perjury I, being duly sworn, declare that I have read t ts stated herein are true and correct.	the foregoing and know the cor	itents thereof	
Signed this	12 day of DECEMBER	2005		
	Robert C. Jenkui General Partner	<u> </u>		
STATE OF _	Illinois		Τ̈́S	90
COUNTY OF_	Cook		SALVATI ZENGE	2 030
On this	: 12th day of Alcanter, 2008	<u> </u>	HY OF STAT	05 DEC 29 AM 11: 46
Robert C. Jenk	sins, Manager of Robert Jenkins Trading LLC, GP , pe	rsonally appeared before me,	FAIR	94:
who is perso	nally known to me			
U whose identi	ity I proved on the basis of			
	Temper L. Holoron	<u></u>		
	(Notary's Printed Name)			
Seal	My Commission Expires: 10/17/2007			

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared _	Robert C. Jenkins, Manage	r of Robert Jenkins Trac	ilng LLC
a general partner of Living Water Fund II, LP	, a (a	n) Delaware	
limited partnership, hereinafter referred to as the "Partnership, hereinafter referred to as the "Partnership referred to as the "Partnership referred to a state of the "Partnership" referred to a state of the "Partnership referred to a state of the "Partnership" referred to a state of the "Partne	rtnership", who certifies as fol	lows:	
I. The amount of capital contributions of the limited	partners is \$ 10,000,000		
2. The anticipated amount of the capital contribution	s of the limited partners that a	are allocated for the pur	poses of
transacting business in Florida is \$ 10,000,000		•	
Under the penalties of perjury I, being duly sworn, d	eclare that I have read the for	egoing and know the co	ontents thereof and
that the facts stated herein are true and correct.			
Signed this 12 day of DECEMBER	. ,2005 .	٠.	05 DEC 29 SECRETARY TALLAHASSEE
Robert	C. Jenkins, A	lanager	FILED 29 AM : 48 ARY OF STATE SSEE, FLORIDA
STATE OF Illinois			<i>></i> ··· o₁
A		-	-
COUNTY OF SOC	December	205	†
Robert Jenkins, Manager of Robert Jenkins Tra	ading LLC personali	y appeared before me,	
who is personally known to me		· 	
whose identity I proved on the basis of			·
Almany Shange (Notary Public Signature)	<u></u>		
Tennifer L. Sherpan (Notary's Printed Name)		OFFICIAL JENNIFER L	L SEAL" SHERPAN STATE OF ILLINOIS
Seal My Commission Expires: 10//7	12007	MY COMMISSION I	EXPIRES 10/17/2007