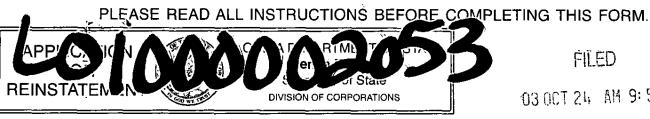
Managing Member/Manage

Typed or printed name of signing Managing Member/Manager



FILED

03 OCT 24 AM 9: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000002053 Name and Mailing Address

> 0004773 01 AT 0,292 **AUTO TO 0 0615 33021-660947 Indicable and indicable the desirable of the first of the ZEIGNER ASSOCIATES II, L.L.C. C/O ESWARD GOTTLIEB 4447 HOLLYWOOD BLVD. HOLLYWOOD FL 33021-6609



New Mailing Address City, State, Zip				4. State/Country of Formation FL 5. Date Organized or Qualified To Do Business in Florida 02/08/2001		
4447.HOLLYWOOD BLVD. HOLLYWOOD FL 33021		City, State, Zip		7. CERTIFICATE OF STATUS DESIRED 55.00 Additional Fee require for a Certificate of Status		
8. Name and Address of Current		Registered Agent		9. Name and Address of New Registered Agent		
GOTTLIEB, EDWARD 4447 HOLLYWOOD BLVD. HOLLYWOOD FL 33021			Name			
			Street Address (P.O. Box Number is Not Acceptable)			
			City			Zip Code
Registered A		GISTERED AGENT MUST SIGN	ED		Dafe 9 70/8)
Title(s)	Name of Managing Members/Managers		et Address of Each ing Member/Manager City / State / Zip			
MGR	GOTTLIEB, ED		4447 HOLLYWOOD BLVD		HOLLYWOOD FL 33021	
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tiling that all fees	that I am managing member/manager of streinstatement application the reason for owed by the limited later than the reason for owed by the limited later than the reason for own and the	r the receiver or trustee empowered dissolution has been eliminated, the been paid. The information indicate	to execute this a limited liability con d on this application	pplication as provided mpany name satisfies to on 5 true and accurate,	for in chapter 608, F.S. I he requirements of section and my signature shall	further certify that when n 608.406, F.S., and that age the same legal effect

0-20-03 I lorda Depathent y State 03 OCT 24 AM 9: 52 RE: ZOGNOR ASSOCIATES (1 SHORETAFE OF STATE L0150002053 PLEASE DE ADVISED I REZERVED NO PAPET WORK to REGISTER Son 2003. I An Enclosing A CKECK For 50 pa Druce to Register Theo you CK#1030 22 Hoteliet