LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUL -3 PM 1:55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Walden Investments II, LLC

Country

USA

DOCUMENT # L01000018990

1. Entity Name

33410

DO NOT WRITE IN THIS SPACE

| 3. Mailing Address 4440 PGA Boulevard | |
|---------------------------------------|--|
| Suite Apt. #, etc. Suite 500 | |
| City & State Palm Beach Gardens, FL | 4. FEI Number 65–11538 |
| | Suite, Apt. #, etc. Suite 500 City & State |

Zip

33410

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 65–1153891 Not Applicable

\$5.00 Additional

Zip Code 33401

Fee Required

DO NOT WRITE IN THIS SPACE

| 7. Name and Address of Current Registered Agent | |
|--|--|
| Name Scott L. McMullen | |
| Street Address (P.O. Box Number is Not Acceptable) 505 South Flagler Drive | |
| Suite 1100 | |

5. Certificate of Status Desired

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

City

West Palm Beach

Country

USA

| 9. | MANAGING MEMBERS/MANAGERS | | |
|--|---|---|----------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM Steven Nielsen 4440 PGA Boulevard, Suite 500 Palm Beach Gardens, FL 33410 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 800006203128\$ |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

Steven Mulser

7/2/02

(561) 627-7171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

FILED

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02 JUL -3 PM 1:55

SECRETARY OF STATE TALL'AHASSEE, FLORIDA

ACCOUNT NO.

072100000032

REFERENCE

COST LIMIT

651175

81491A

AUTHORIZATION

\$ 55.00

ORDER DATE : July 3, 2002

ORDER TIME : 11:31 AM

ORDER NO. : 651175-005

CUSTOMER NO:

81491A

CUSTOMER: Ms. Laura K. Mcneill

Jones Foster Johnston & Stubbs

505 South Flagler Drive

Suite 1100

West Palm Beach, FL 33401

ANNUAL REPORT FILING

NAME: WALDEN INVESTMENTS II, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#1135

EXAMINER'S INITIALS: