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To:		65	
	Division of Corporations	KR33	
	Fax Number : (850)205-0383		AH
From:	:	50	<u>.</u>
	Account Name : FIELDSTONE LESTER SHEAR & DENBERG	<u>a</u>	
	Account Number : 119990000180	另	сī.
	Phone : (305) 357-5775	/	~~2
	Fax Number : (305)357-5534		
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

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FLSD	Trust	Associates	II,	LLC
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ARTICLE 1 - Name:

The name of the Limited Liability Company is:

FLSD TRUST ASSOCIATES II, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

201 Alhambra Circle, Suite 601 Coral Gables, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Michael B. Denberg

201 Alhambra Circle, Suite 601 Florida street aldress (P.O. Box NOT acceptable)

Coral Gables, FL 33134 City, State, and Zip



Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of pill statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F S. 608, F S.

dt's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

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(An additional article must be	added if an effective date is requested)
144	VX
Signature of a member of a	p authorized representative of a member.

(In accordance with section 602,408(3)), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael B. Denberg, Authorized Representative Typed or printed name of signee

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