LIMITED LIABILITY COMPANY FLORIDA DEF					Comp ARTMEN Parine Ha		99 MAR 18 AM II: 30			
	NUAL REPO	6/8	Secretary of State DIVISION OF CORPORATIONS Corporation Supplemental Fee			SECRETATE TATE TATE OF LORIDA				
\$ 188.75	Make (Check Payable								
of Limited (Mailing Address Liability Compan	y DOCE	MENT	「# L980	0000:	2161	1a. Principal P	lace of Business	Address	
RMC II FLORIDA, L.L.C. 105 SOUTH NARCISSUS AVENUE WEST PALM BEACH FL 33401								UTH NARCISSUS AVENUE ALM BEACH FL 33401		
Principal Place of Business			2a. Mailing Address			3. Date Organi	zed or Qualified	3a. State of Formation		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				10/07/1998 FL		FL Applied For	
City & State			City & State						Not Applicab	
φ	Country		Zip		Country		5. Date of Last Report		6. Certificate of Status Desire \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agen					ent N		Name and Addre	ss of New Regis	tered Agent/Office	
s registered c	office or registere				es, the above				Zip Code iment for the purpose of changi s. Thereby accept the appointment	
IGNATURE	=	Luctural Association	Armru . rh . f	Holls to a street American	ise i la r	The state and the		DATE		
(Responsed Agent Accepting Agent) Title Managing Members/Managers			rs	Business Street Address				City, State and Zip Code		
AGRM CAPLAN, MARILYN			12 EAST 69TH STREET			ET	NEW YORK NY			
							90	0002 -03/29 ****\$	822:659- 1/9901145017 66.25 ****188.7	