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Division of Corporations

Fax Number : (850)617~6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Foreign Limited Liability Company FIA TIMBER MANAGEMENT II, LLC

والمواصدان بمناه والمستري والمراج والمراج والمراجع والمراجع والمناه وا

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COVER LETTER-

	gistration Section vision of Corporations	. `		
SUBJECT:	FIA Timber Management II, LLC	•		
Sobsher.	.)	Name of Limited Liability Corr	ряпу	
	f "Application by Poreign Limited L ad check are submitted to register the			
Please return	all correspondence concerning this	matter to the following:	·	
	Genia Smith		·	
	•	Name of Person		*
	Forest Investment Associates			•
		Firm/Company		
	15 Piedmont Center, Suite 1250			•
		Address		
	Atlanta, Georgia 30305	•		
•		City/State and Zip Code		
•	gsmith@forestinvest.com		•	
	E-mail address:	(to be used for future annual r	eport notification)	
or further in	formation concerning this matter, ple	ease call:		
Laure	Johnson	nt (404	853-8570	
	Name of Person	Area Code & Daytime '	Telophone Number	
Divis Rogis P.O.	LING ADDRESS; ion of Corporations stration Section Box 6327 hasseu, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2667 Executive Center Circ Tallabassee, FL 32301	ole .	
	a check for the following amo 00 Filing Fee \$\int_{\text{State}}\$130.00 Filing F Certificate of Sta	Fee & S155.00 Filing Foo.	& \$160.00 Filing Foe, Certification of Status & Certified Copy	ie

Ft.037 - [#U3/2010 C T Symme (mbine

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT IN INVESS IN THE STATE OF FLORIDA.

	ED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: A Timber Managoment II, LLC	
1 ,	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
CONSON	ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the tof the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabuty," "L.L.C," "LUC.")	
	aware Sdiction under the law of which foreign limited liability 3. 27-0779961 (FEI number, if applicable)	·
į, Au,	gust 20, 2009 5, Perpotual	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	_
Mại	roh 29, 2012	
·	(Date first transacied business in Florida, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)	
c/o	Porest Investment Associates, 15 Piedmont Center, Suite 1250, Atlanta, Georgia 30305	a
		2
	(Street Address of Principal Office)	PR
lf li	mited liability company is a manager-managed company, check here	2
The	name and usual business addresses of the managing members or managers are as follows:	3
Mic	hael F. Hart, L. Michael Kelly and Marc A. Waltey c/o Forest Investment Associates, 15 Pledmont Center,	. ***
Suit	te 1250, Atlanta, Georgia 30305; and Timothy Corriero and Thomas J. Healey c/o Healey Timber, LLC,	23
310	South Street, Morristown, New Jersey 07960	
jurisci	hed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recicion under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a nof the certificate under oath of the translator must be submitted.)	ords in
Nat	ure of business or purposes to be conducted or promoted in Florida;	
Gener	al Partner of FIA Timber Pariners II, L.P.	
	milare of Hart	
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of pegjary that the facts stated betoin are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
	Michael F. Hart	
	Typed or printed name of signee	

FLD97 - 10/03/2010 C Y System Ordin

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: FIA Timber Management II, LLC				
lf unavailable	, the alternate to be use	d in the state of Florida is:		
2. The name r	and the Florida street ac	ddress of the registered agent and office are:		
	C T Corporation System			
	description of the description of the second se	(Name)		
	1200 South Pine Island Ro	ond		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		- 	
	Plantation	FL 33324		
		City/State/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 all 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, Florida Statutes.

C T Corporation System

Security (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FLOST - 10/05/2010 C T System Calma

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FIA TIMBER MANAGEMENT II, LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4722495 8300

120417829

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 9495569

DATE: 04-11-12