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Florida Department of State
Division of Corporations
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Division of Corporations
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From:
Account Name : BERMAN,RENNERT,VOGEL & MANDLER,P.A.
Account Number : 076103002011
Phone : (305)577-4177
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LP/LLLP REINSTATEMENT

VILLA HERMOSA, LTD.

Certificate of Status	0
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

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CR2E039 (1/07)

DOCUMENT # A33546

1. Name of Limited Partnership
Villa Hermosa, Ltd.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
2121 Ponce de Leon Blvd.	2121 Ponce de Leon Blvd.
Suite, Apt. #, etc. PH	Suite, Apt. #, etc. PH
City & State Coral Gables, Florida	City & State Coral Gables, Florida
Zip 33134 County US	Zip 33134 County US

4. Date Formed or Registered To Do Business in Florida 10/09/1992

5. FEI Number 59-0596699 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Registered Agents of Florida, LLC
Street Address (P.O. Box Number is Not Acceptable): 100 S.E. 2nd Street
Suite, Apt. # Etc: Suite 2900
City: Miami State: FL Zip Code: 33131

7. FEES:
Filing Fee(s): $411.25 for each year due this office.
Supplemental Fee(s): $88.75 for each year due this office.
Penalty Fee(s): $500 for each year or part thereof limited partnership revoked on our records.
☑ A $500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the $500 penalty fee(s) be waived.

9. Pursuant to the provisions of section 620.1810 or 620.1909 Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Charles Reed VP (REGISTERED AGENT MUST SIGN) DATE 12/12/08

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Cornerstone Villa Hermosa, Ltd.	2121 Ponde de Leon Blvd, PH	Coral Gables, FL 33134	A94000001379
Deedco Villa Hermosa, Inc.	141 N.E. Third Ave. Suite 500	Miami, FL 33132	P98000034930

REINSTATEMENT
2007-08

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Juan B Rogers DATE 12/12/08

Typed or Printed Name of General Partner Signing Form _____ Telephone Number _____