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2006 DEC 12 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # B00000000257	
1. Entity Name SAWGRASS MILLS PHASE IV LIMITED PARTNERSHIP	



Principal Place of Business 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	Mailing Address 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209
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2. Principal Place of Business 5425 Wisconsin Avenue Suite 500	3. Mailing Address 5425 Wisconsin Avenue Suite 500
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City & State Chevy Chase, MD	City & State Chevy Chase, MD
Zip 20815	Zip 20815
Country USA	Country USA

10232006 REIN-LP CR2E100 (11/05)

4. FEI Number 64-2009121	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ Additional Fee Required	\$8.75

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. Pursuant to the provisions of section 620.1610 or 620.1609, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE *John B. Argeo* **John B. Argeo**
Asst. Secretary & V. President

FILED MONTHS FROM 12-01-06
After January 1, 2007, Fee will be \$2006.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be charged on the forms; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # M00000001707	NAME SAWGRASS MILLS PHASE IV, L.L.C.	STREET ADDRESS 5425 Wisconsin Avenue Suite 500	
STREET ADDRESS 1300 WILSON BLVD., SUITE 400		CITY-ST-ZIP Chevy Chase, MD 20815	
CITY-ST-ZIP ARLINGTON, VA 22209			
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REINSTATEMENT

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to conduct this report as required by Chapter 620, Florida Statutes.

SIGNATURE *Mary Ellen Seravalli* **Mary Ellen Seravalli, Esq., V.P.**
By: SAWGRASS MILLS PHASE IV LIMITED PARTNERSHIP, a California limited partnership
By: THE MILLS LIMITED PARTNERSHIP, its Manager
By: THE MILLS CORPORATION, its General Partner

Date **12/7/06** (301) 968-8000

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LP/LLLP REINSTATEMENT

SAWGRASS MILLS PHASE IV LIMITED PARTNERSHIP

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