1300000002

LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

FILED

03 DEC 30 AM 10: 30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT	#	8000000000	259
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1. Name of Limited Partnership

Greenhead, Ltd. (doing business in Florida as Greenhead, Ltd. of Texas)

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2. Principal Office Address 3819 Towne Crossing Blvd. Suite, Apt. #, etc. Suite 100 City & State Mesquite, TX		3. Mailing Office Address SC-TAL Suite, Apt. #, etc. City & State						
					Zip 75150	Country USA	Zip	Country
						8. Name and Address	of Current Registe	red Agent
Name			* * * * * * * * * * * * * * * * * * * *					

4. Date Formed or Registered To Do Business in Florida	8/23/00
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752577889

5. FEI Number

Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee require for a Certificate of Status

7a. Capital Contributions as shown on Record:

236,000.00

75. Amount of Capital Contributions in FLORIDA to date: 236,000.00

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road

Sulte, Apt. #, Etc.

Plantation

Zip Code FL 33324

FEES:

- Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
- Supplemental Fee(s): \$88.75 for each <u>year due</u> this office, beginning with 1992 calendar year.
- 3.) Penalty Fee(s): \$500 penalty fee for each year recort form is definations. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
- Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, I am familiar with, and accept the abligations of section 520.192, Florida Statutes. CONNIE BRYAN

SIGNATURE (Registered Agent Accepting Appointment)

Name(s) of General Partner(s)

SPECIAL ASSISTANT SECRETARY

12/30/2003

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 10. Registration Document Number

TI Sub GP, LLC

3819 Towne Crossing Blvd., Suite 100

Mesquite, TX 75150

City, State and Zip Code

M0000001683

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REMISTATEMENT 2002

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

nation supplied with this filling is voluntarity furnished and does not qualify for the examption stated in Section 119.07(3)(f). Florida Statutes. I release the Division of non-compliance with Section 119.07(3)(f) in the event that the information supplied is deemed exampt from public access. I further certify that the information indicated 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 large equired by chapter 820, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Bildiaer erou

97212240072 Telephone Number