2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000069072

City-St-Zip:

Entity Name: FLEXSPACE CONDOS, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1400 NW 107 AVENUE MIAMI, FL 33172 US **Current Mailing Address: New Mailing Address:** 1400 NW 107 AVENUE MIAMI, FL 33172 FEI Number: 42-1674589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEVY, JOEL ADLER, LINDA K 1400 NW 107 AVENUE 1400 NW 107 AVENUE MIAMI, FL 33172 MIAMI, FL 33172 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: LINDA K. ADLER 04/30/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ADLER, MICHAEL M Name: Name: Address: 1400 NW 107 AVENUE Address: City-St-Zip: MIAMI, FL 33172 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ADLER, MATTHEW L Name: Address: 1400 NW 107 AVENUE Address: City-St-Zip: MIAMI, FL 33172 US City-St-Zip: Title: MGR () Delete Title: **EVP** (X) Change () Addition LEVY, JOEL Name: HARRIS, BRETT W Name: 1400 NW 107 AVENUE 1400 NW 107 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33172 US City-St-Zip: MIAMI, FL 33172 US Title: () Delete Title: () Change (X) Addition Name: Name: ADLER, LINDA K 1400 NW 107 AVENUE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

MIAMI, FL 33172 US

SIGNATURE: LINDA K. ADLER S 04/30/2009