

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY

FLORIDA DEPARTMENT OF STATE

03 JAN 23 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M01000001379

1. Limited Liability Company's Name

S.E. Residential East LLC

2. Principal Office Address

950 Third Avenue

Suite, Apt. #, etc.

18th Floor

City & State

New York, NY

Zip

10022

Country

USA

3. Mailing Office Address

950 Third Avenue

Suite, Apt. #, etc.

18th Floor

City & State

New York, NY

Zip

10022

Country

USA

4. State/Country of Formation

DE

5. Date Organized or Qualified  
To Do Business in Florida

6/19/2001

6. FEI Number

13-4177580

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301-2525

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

*Lylia M. White*

REGISTERED AGENT MUST SIGN

Date

1/22/03

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	The Praedium Performance Fund IV, L.P.	950 Third Ave, 18th Flr	New York, NY 10022

400010671784

REINSTATEMENT

02-03

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

*A. Floyd Lottin*

Date

1/17/03

Daytime Phone # 212-224-5600

Typed or printed name of signing Managing Member/Manager A. Floyd Lottin, Vice President of General Partner of Managing Member

CR2E041 (9/01)



CORPORATION SERVICE COMPANY™

FILED

03 JAN 23 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 903165 5155201

AUTHORIZATION : *Patricia Pignato*

COST LIMIT : \$ 905.00 *265.00*

ORDER DATE : January 22, 2003

ORDER TIME : 10:47 AM

ORDER NO. : 903165-020

CUSTOMER NO: 5155201

CUSTOMER: Ms. Cynthia E. Kingston  
The Praedium Group  
950 Third Avenue  
18th Floor  
New York, NY 10022

REINSTATEMENT

NAME: S.E. RESIDENTIAL EAST LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
03 JAN 23 AM 11:53  
DIVISION OF CORPORATION