


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

FILED

01 OCT 24 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b> 		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> P40710			
<b>1. Corporation Name</b> RCMP Management, Inc.			
<b>2. Principal Office Address</b> ATTN: Lesley Benjamin Suite, Apt. #, <i>Go to the Related Companies C.P.</i> 625 Madison Avenue City & State New York, NY Zip Country 10022 USA		<b>3. Mailing Office Address</b> ATTN: Lesley Benjamin Suite, Apt. #, <i>Go to the Related Companies C.P.</i> 625 Madison Avenue City & State New York, NY Zip Country 10022 USA	

**REINSTATEMENT**

2001

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 9/30/92	
<b>5. FEI Number</b> 13-3644948	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$6.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
Name Corporate Service Company		
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street		
Suite, Apt. #, Etc.		
City Tallahassee	State <b>FL</b>	Zip Code 32301

800004651068--3

LS

**8.** I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Deborah D. Skipper **Deborah D. Skipper** Date 10/24/01  
 REGISTERED AGENT MUST SIGN **Asst. Secretary**

CR2E081 (9/00)

<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
C	David J. Wine	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022
S	Susan J. McGuire	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022
D	Stephen M. Ross	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022
EVP	Michael Brenner	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022
Vp	Jeff T. Blau	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022
P	Jeffrey Brodsky	C/O The Related Companies, L.P., 625 Madison Avenue	New York, NY 10022

**10.** I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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** Susan J. McGuire **Susan J. McGuire** Date 10/18/01 Daytime Phone # 212 421 5333  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2012



ACCOUNT NO. : 072100000032  
 REFERENCE : 153506 4321791  
 AUTHORIZATION : *Patricia Pizeto*  
 COST LIMIT : \$ 750.00

ORDER DATE : October 23, 2001  
 ORDER TIME : 10:04 AM  
 ORDER NO. : 153506-005  
 CUSTOMER NO: 4321791  
 CUSTOMER: Ms. Kailah Spencer  
 The Related Companies, Inc.  
 625 Madison Avenue, 9th Floor  
 New York, NY 10022

REINSTATEMENT

NAME: RCMP MANAGEMENT, INC.

RECEIVED  
 01 OCT 24 AM 10 25  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight EX 1156  
 EXAMINER'S INITIALS \_\_\_\_\_