

M09000002955

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

11 SEP 27 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M09000002955

1. Limited Liability Company's Name

T6 Unison Site Management LLC

BK

400212425534

2. Principal Office Address - No P.O. Box

110 Thomas Johnson Dr.

Suite, Apt. #, etc.

Suite 110

City & State

Frederick, MD

Zip

21702

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

21702

4. State/Country of Formation

Delaware

5. Date Organized or Qualified
To Do Business in Florida

07/31/2009

6. Phone Number

27-0284761

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 or Not Applicable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301-2525

REINSTATEMENT

2010-11 Jan

jehin@unisonsite.com

(To be used for future annual report notices)

9. I, being appointed the registered agent, hereby declare on behalf of this company, corporation and accept the obligations of Chapter 623, F.S.

Signature of
Registered Agent

Kimberly B. Moret

Kimberly B. Moret
as its agent

Date 09/27/2011

10. Name and Street Address of Managing Member/Manager

Title

Name of
Managing Member/Manager

Street Address of Each
Managing Member/Manager

City/State/Zip

Sole
Member

Unison Ground Lease Funding, LLC

110 Thomas Johnson Blvd., Suite 110

Frederick, MD 21702

REINSTATEMENT 2010-2011

11. I certify that I am managing member/manager or the person or person empowered to execute this application as provided for in Chapter 623, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company now satisfies the requirements of section 603.406, F.S., and that all fees owed by the limited liability company have been paid. The information submitted in this application is true and accurate, and the signature and name have the same legal effect as if made and signed by me. I am aware that false information submitted in this document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Signature of Managing
Member/Manager

James R. Holmes

Date 09/27/2011

Phone # 212-909-2505

Typed or printed name of signing Managing Member/Manager

James R. Holmes, VP/Secretary of Sole Member



CORPORATION SERVICE COMPANY

M09000602955

ACCOUNT NO. : I20000000195

REFERENCE : 925719 4322603

AUTHORIZATION

COST LIMIT \$ 105.00

377.50 + 5.00

ORDER DATE : September 27, 2011

ORDER TIME : 2:48 PM

ORDER NO. : 925719-005

CUSTOMER NO: 4322603

REINSTATEMENT

NAME: T6 UNISON SITE MANAGEMENT LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS BK