2005 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A01000000202

1. Entity Name
SEBASTIAN RESOURCES 400 LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 DEC 16 AM 9:17

Principal Place of Business	Mailing Address
700 NE 7TH AVE UNIT 4 FT LAUDERDALE, FL 33304	1900 Glades Rd. (Suite 401) Boca Raton, FL 33431

12072005 REIN-LP CR2E100 (6/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 04-3601897 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
W. RODGERS MOORE, P.A. Suite 401 1900 Glades Road Boca Raton, FL 33431	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE W. Rodgers Moore 12/7/05
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.
$1,329,750.00	

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L99000005479	STREET ADDRESS	
NAME	PANDANUS 400 LLC	CITY-ST-ZIP	600062513796 12/20/05 01053 014 **10Cb.25
STREET ADDRESS	Suite 401		
CITY-ST-ZIP	1900 Glades Road Boca Raton, FL 33431		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	600062513830 12/20/05 01053 015 **6.12
STREET ADDRESS			
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DOCUMENT #		STREET ADDRESS	
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DOCUMENT #		STREET ADDRESS	REINSTATEMENT 2005
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing [illegible] qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my [illegible] shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Wright S. Manager 12-8-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #