

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 NOV -9 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200112459802
11/20/07--01031--016 **\$500.00

DOCUMENT # A03000000110

1. Name of Limited Partnership

YORKER, LTD.

W07-53430

2. Principal Office Address - No P.O. Box #
501 Brickell key Dr

3. Mailing Office Address
501 Brickell key Dr

Suite, Apt. #, etc.
103

Suite, Apt. #, etc.
103

City & State
Miami FL

City & State
Miami FL

Zip
33131

Country
USA

Zip
33131

Country
USA

4. Date Formed or Registered To Do Business in Florida 1/23/03

5. FEI Number
820583569

☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
Seth Berger

Street Address (P.O. Box Number is Not Acceptable)
501 Brickell key Dr

Suite, Apt. #, Etc.
103

City
Miami

State
FL

Zip Code
33131

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.

☐ A \$500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$500 penalty fee(s) be waived.

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) [Signature] DATE 10/15/07

(REGISTERED AGENT MUST SIGN)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Banya Group LTD LLP	501 Brickell Key Dr 103	Miami, FL 33131	A0200000432 LS 200111189082 10/23/07--01014--003 **\$500.00 REINSTATEMENT 06-07

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE [Signature]

DATE 10/15/07

Typed or Printed Name of General Partner Signing Form Seth Berger

Telephone Number 305-358-2750