

**2004 LIMITED PARTNERSHIP REINSTATEMENT**

**FILED  
Oct 13, 2004  
Secretary of State**

DOCUMENT# A03000001388

**Entity Name:** LAMKIN PROPERTIES LIMITED PARTNERSHIP

**Current Principal Place of Business:**

535 BARRIER DUNES DRIVE  
PORT ST JOE, FL 32456

**New Principal Place of Business:**

**Current Mailing Address:**

535 BARRIER DUNES DRIVE  
PORT ST JOE, FL 32456

**New Mailing Address:**

**FEI Number:** 56-2404796      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LAMKIN, JEFFREY B  
535 BARRIER DUNES DRIVE  
PORT ST JOE, FL 32456    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 2,550,000.00  
**Amount of Capital Contributions in Florida to date:** 2,550,000.00

**GENERAL PARTNER INFORMATION:**

Document #: L03000034800  
Name: JBL MANAGEMENT, LLC  
Address: 535 BARRIER DUNES DRIVE  
City-St-Zip: PORT ST JOE, FL 32456

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic signature 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: JEFFREY B. LAMKIN

\_\_\_\_\_  
Electronic Signature of Signing General Partner

M.M.

10/13/2004

\_\_\_\_\_  
Date