* PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT DOCUMENT # A0400001619 1. Name of Limited Partnership					FILED 08 AUG 28 PM 12: 17 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
HERRADA INVESTMENTS II, LLP						
2. Principal Office Address - No P.O. Box # 1500 WEST 21st STREET		3. Mailing Office Address			CR2E039 (1/07)	
Suite, Apt. #, étc.		Suite, Apt. #, etc.			4. Data Formed or Registered FLORIDA To Do Business in Florida	
City & State Miami Beach		City & State			5 FEI Number On 1619 Applied For	
33140	Country	Zip ,	Country		6. CERTIFICATE OF STATUS DESIRED	Not Applicable \$8.75 Additional Fee required for a Certificate of Status
	8. Name and Address of	Current Registered Agen	rrent Registered Agent		7. FEES:	
ÄÑDRES H	ERRADA			• .	Filing Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$88.75 for each year due this office.	
TOOU WEST 21st STREET					Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.	
Suite, Apt. #, Etc.				A \$500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in		
Міамі веа	CH	FL 3314 ^{Zio Code}			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, I 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) Andic Succession Sign) DATE 8/31/08						
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
HERRADA REALTY, LLC		1500 West 21st. Street		Miar	mi Beach	L03000006675
	MENT <u>2005</u>				300134914413 08/25/0801057008 **2000.00	
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-compilarice 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 acceptate 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 smiled partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.						
SIGNATURE Andre Succession DATE 8/21/08						
Typed or Printed Name of General Partner Signing Form						