

W
9
3

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000224114 3)))



H150002241143ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LP/LLP REINSTATEMENT
LNR HERITAGE HARBOUR, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03 4
Estimated Charge	\$2,000.00

Please give to:
Kathy Ashton
Thank You!

Electronic Filing Menu

Corporate Filing Menu

Help

1033

FILED

SEP 17

15 SEP 7 AM 8:25

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # A05000001653

1. Name of Limited Partnership

LNR Heritage Harbour, LLLP

2. Principal Office Address - No P.O. Box #
4350 Von Karman Avenue

3. Mailing Office Address
4350 Von Karman Avenue

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

City & State
Newport Beach, CA

City & State
Newport Beach, CA

Zip
92660

Country

Zip
92660

Country

CR2E039 (1/11)

4. Date Formed or Registered
To Do Business in Florida **08/25/2005**

5. FEI Number

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
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation

FL **33324**

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.

E-mail Address:

PGALVIN@STARWOOD.COM

E-Mail address to be used for future annual report notices

9. Pursuant to the provisions of section 620.1410 or 620.1009, 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)

Connie Boyer

Connie Boyer

DATE **9/17/2015**

(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 Number)	City, State and Zip Code	10a. Registration Document Number
LNR Heritage Harbour GP, LLC	4350 Von Karman Avenue, Suite 200	Newport Beach, CA 92660	L05000084046

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 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 effect 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE **SEE ATTACHED**

DATE **9-16-15**

Typed or Printed Name of General Partner Signing Form **SEE ATTACHED**

Telephone Number **949-885-8500**

2053

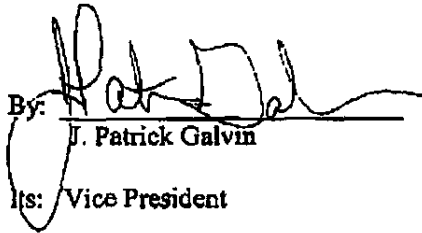
LNR Heritage Harbour, LLLP
a Florida limited liability limited partnership

By: **LNR Heritage Harbour GP, LLC**
a Florida limited liability company, its general partner

By: **LNR CPI A&D Holdings, LLC**
a Delaware limited liability company, its member

By: **LNR Commercial Property Investment Fund Limited Partnership**
a Delaware limited partnership, its member

By: **LNR CPI Fund GP, LLC**
a Delaware limited liability company, its general partner

By: 
J. Patrick Galvin

Its: Vice President