APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

A12308

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 APR 14 PM 2:19

DOCUMENT # A12308

1. Name of Limited Partnership
Boca Glades Associates, Ltd.

4/14/95

DO NOT WRITE IN THIS SPACE.

2. Mailing Address	3. Principal Office Address	4. Date Formed or Registered To Do Business in Florida
PO Box 1089	One Insignia Financial plaza	3/29/1982
Suite, Apt. #, etc	Suite, Apt. #, etc	5. FEI Number: 36-3169725 ☐ Applied For ☐ Not Applicable
City & State: Greenville, SC	City & State: Greenville, SC	6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status
Zip: 29602 Country: USA	Zip: 29601 Country: USA	7. State or Country of Formation

8a. Capital Contributions as Shown on Record
$3,651,900

8b. Amount of Capital Contributions in FLORIDA to date
$3,651,900

FEES: 1.) Filing Fee(s): Computed at a rate of $7 per $1,000 on amount entered in 8b, with a minimum filing fee of $52.50 and a maximum of $437.50, for each year due this office.
2.) Supplemental Fee(s): $138.75 for each year due this office, beginning with 1992 calendar year.
3.) Penalty Fee(s): $500 penalty fee for each year report form is delinquent.
Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee. $3,123.75 per Brenda @ Fla. Dept. of State.

9. Name and Address of Current Registered Agent

Prentice Hall Corporation System, Inc
110 North Magnolia Street
Tallahassee, FL 32301

10. If changed, new registered agent/office

Name: CT Corporation Systems
Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
Suite, Apt. #, etc:
City: Plantation FL Zip Code: 33324

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Connie Bryan CONNIE BRYAN SPECIAL ASSISTANT SECRETARY 4/14/97

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

11. Names of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration Document Number
MAERIL, Inc.	One Insignia Financial Plaza	Greenville, SC 29601	F94000003327

700002144787--8
-04/16/97--01046--003
***3123.75 ***3123.75

PENALTY $ 1,500.00
AR $ 1312.50
SUPP $ 311.25
$ 3,123.75

REINSTATEMENT 1995-1997

MC

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

12. I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this 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 MAERIL, Inc. By: Kelley M. Buechler, Asst Sec. DATE 3/25/97

Kelley M. Buechler, Assistant Secretary
Name and Title of Person Signing Form — General Partner Signing Form

Telephone Number 864/239-1000

CR2E-039 (4/95)