## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM 🛪 🗟

LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF ST Secretary of State DIVISION OF CORPORATIONS	ATE		FEB 28 AM
DOCUMENT # A14457  1. Name of Limited Partnership			<b>AM</b>	
Sugar Island Associates, Ltd			T 87	
		3002232 02/28/1201028	88653 021 **2000.00	
2. Principal Office Address - No P.O. Box# 1177 Geo Bush Blvd	3. Mailing Office Address		CR2E039	
Suite, Apt. #, etc. 307	Suite, Apt. #. etc.		Date Formed or Registered 05/06/1983     To Do Business in Florida	
City & State Delray Beach, Florida	City & State	1.717	<sup>5</sup> 59-2231996	Applied For Not Applicable
33483 Country USA	Zip Country		6. CERTIFICATE OF STATUS DESIRED	= \$8.75 Addutional Fee required
8. Name and Address of Current Registered Agent			7. FEES:	-
Leon E. Teske			Filing Fee(s): \$411.25 for each year due this office.	
Street Address (P.O. Box Number is Not Acceptable) 1177 Geo Bush Blvd		Supplemental Fee(s): \$88.75 for each year due this office.  Penalty Fee(s): \$500 for each year or part thereof limited		
		partnership revok	ed on our records.	
Suite 4ot. #, Etc.		E-mail Address:		
Delray Beach FL 33483			leteske@aol.com  E-Mail address to be used for future annual report notices	
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.				
Flonda Statutes  SIGNATURE (Registered Agent Accepting Appointment)  DATE 2/23/12				
(RECISTERED AGENT MUST SIGN)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
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
DL1, LLC	1177 Geo Bush Bivd	Deli	ray Beach, Fl 33483	M12000000853
REINSTATEMENT 201				
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
11. Ido 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, FS. In the event that the information supplied exist each 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 coath. I further certify that I am a General Particle particleship, net ever or furtisete 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, ES.  SIGNATURE  DATE  DATE				

1. Pleaseton FEB 2 9 2012