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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2006 JAN 25 AM 9:47

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>A20644</u> 1. Name of Limited Partnership FORT MYERS, LTD.					
2. Principal Office Address 1100 Spring Street, N.W.			3. Mailing Office Address 1100 Spring Street, N.W.		
Suite, Apt. #, etc. Suite 550		Suite, Apt. #, etc. Suite 550		4. Date Formed or Registered to Do Business in Florida 8/27/85	
City & State Atlanta, GA		City & State Atlanta, GA		5. CR Number 581632995	
Zip 30309-2848		Zip 30309-2848		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
Country USA		Country USA		7. FEES: Filing Fee(s): \$811.25 for each year due this office. Supplemental Fee(s): \$22.75 for each year due this office. Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.	
8. Name and Address of Current Registered Agent Name: Hugo H. deBeaubien, Esq., deBeaubien, Nighl, Simmons, Mantzaris & Neal, LLP Address: 332 North Magnolia Avenue Suite, Apt. #, Etc.: City: Orlando State: FL Zip: 32801					
9. I, the signatory, hereby accept the appointment of registered agent, I see further use, and accept the obligations of Chapter 609, Florida Statutes. I hereby accept the appointment of registered agent, I see further use, and accept the obligations of Chapter 609, Florida Statutes. SIGNATURE (Registered Agent Address to 409447/NAME) <u>Hugo H. deBeaubien</u> <u>Hugo H. deBeaubien</u> <u>1/24/06</u>					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
10a. NAME of General Partner(s)		Address of each Group of Partner (Do NOT Use P.O. Office Box Number)		City, State and Zip Code	
Selig Enterprises, Inc.		1100 Spring St., NW		Atlanta, GA 30309	
				10b. Registration Identification Number 820496	
REINSTATEMENT 03-06					
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
11. I am hereby certifying that the information furnished with this form is true, correct, and that I am qualified to be the registered agent for the partnership as provided in Chapter 609, Florida Statutes. I accept the duties of a registered agent for a limited partnership with Chapter 609, F.S. in the event that the information supplied is changed during term of this process. I further certify that the information submitted on this form is true and correct and that no information has been omitted that would render this form false or misleading. I further certify that I am a General Partner of the limited partnership. I hereby accept the obligations of Chapter 609, Florida Statutes.					
SIGNATURE <u>William J. Dawkins</u>		DATE <u>1/23/06</u>		404-876-5511	
Name of Principal Office of General Partner (Signing Agent) <u>William J. Dawkins, Senior Vice President</u>					

and Secretary of Selig Enterprises, Inc.

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Florida Department of State

Division of Corporations
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TALLAHASSEE, FLORIDA

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LP/LLP REINSTATEMENT

FORT MYERS, LTD.

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