

# 2014 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A24015

**FILED**  
**Jul 16, 2014**  
**Secretary of State**

**Entity Name:** ZION JACKSONVILLE LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4630 FIELDSTONE RD.  
RIVERDALE, NY 10471

**New Principal Place of Business:**

9469 EASTPORT ROAD  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

4630 FIELDSTONE RD.  
RIVERDALE, NY 10471

**New Mailing Address:**

225 EAST 57TH STREET  
SUITE 14E  
NEW YORK, NY 10022

FEI Number: 13-3382119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZION, ABRAHAM  
%ZION JACKSONVILLE LIMITED PARTNERSHIP  
9469 EASTPORT ROAD  
JACKSONVILLE, FL 32218 US

**Name and Address of New Registered Agent:**

EDWARDS COHEN DAWSON MANGU & NOBLE, P.A.  
200 WEST FORSYTH STREET  
SUITE 1300  
JACKSONVILLE, FL 32202 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID J. EDWARDS

07/16/2014

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: ZION, ABRAHAM

Address: 4630 FIELDSTONE RD.

City-St-Zip: RIVERDALE, NY

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: MARK ZION

GP

07/16/2014

Electronic Signature of Signing General Partner

Date