

2009 LIMITED PARTNERSHIP REINSTATEMENT

FILED

2009 JUL -7 PM 12: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06292009 REIN-LP CR2E100 (1/07)

4. FEI Number 65-0108258 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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, Florida Statutes.

SIGNATURE see attached

Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

DATE

FILE NOW!!! FEE IS \$2000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	H61082
NAME	MONTENAY POWER CORP.
STREET ADDRESS	6990 NW 97 AVENUE
CITY - ST - ZIP	MIAMI, FL 33178
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	500158229635
CITY - ST - ZIP	07/07/09 01064--015 **2000.00
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	REINSTATEMENT 08-09
CITY - ST - ZIP	CR 17-8-09
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Steve Passage Steve Passage 6/30/09 212.947.5824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

President of Montenay Power Corp. GP of MDC

STAPLE CHECK HERE

2009 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A25932

1. Entity Name
MONTENAY-DADE, LTD.



Principal Place of Business
6990 NW 97 AVENUE
MIAMI, FL 33178

Mailing Address
6990 NW 97 AVENUE
MIAMI, FL 33178

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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FL

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8. 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, Florida Statutes.

SIGNATURE Melissa Allen - Melissa Allen - Assistant Secretary 6-30-09
Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN) DATE

FILE NOW!!! FEE IS \$2000.00

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

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