

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 JUL 24 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A29128

1. Name of Limited Partnership

LONDON ARMS/LYN MAR, LTD.

04

PK

CR2E039 (11/05)

2. Principal Office Address

One Boston Place

Suite, Apt. #, etc.

Suite 2100

City & State

Boston, MA

Zip

02108

Country

US

3. Mailing Office Address

One Boston Place

Suite, Apt. #, etc.

Suite 2100

City & State

Boston, MA

Zip

02108

Country

US

4. Date Formed or Registered
To Do Business in Florida 10/27/1989

5. FEI Number
04-3084070

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Robert Saland

Street Address (P.O. Box Number is Not Acceptable)

1666 Kennedy Causeway, Suite 505

Suite, Apt. #, Etc.

City

North Bay Village

State

FL

Zip Code

33141

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records

9. Pursuant to the provisions of section 620 1810 or 620.1905, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

(REGISTERED AGENT MUST SIGN)

DATE

7/20/06

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
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

BCP London Arms, Inc.

One Boston Place
Suite 2100

Boston, MA 02108

P31520

727 Collins Corp.

1666 Kennedy Causeway
Suite 505

N. Bay Village, FL
33141

L25254

REINSTATEMENT 2004-2006

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08/29/06--01016--020 **1000.00

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

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information 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 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

DATE

7/20/06

Typed or Printed Name of General Partner Signing Form

Robert Saland President 727 Collins Corp

Telephone Number

305-538-9552