

A32244

Florida Department of State

Division of Corporations

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LP/LLP REINSTATEMENT

BRANDON SHOPPING CENTER PARTNERS, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,000.00

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SECRETARY
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2007 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT #A32244			
1. Entity Name BRANDON SHOPPING CENTER PARTNERS, LTD.			
Principal Place of Business 11601 WILSHIRE BLVD. 11TH FLOOR LOS ANGELES, CA 90025		Mailing Address 11601 WILSHIRE BLVD. 11TH FLOOR LOS ANGELES, CA 90025	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBI Number 36-3795255		Applied For Not Applicable	
5. Certificate of Status Observed ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		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 620.1510 or 620.1509, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes. <i>Carrie Bay</i> 12/11/07 SIGNATURE DATE			
FEE NOW!! FEE IS \$1000.00 After January 1, 2005, Fee will be \$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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	M020000000000 WEA BRANDON I GP, LLC 11601 WILSHIRE BLVD. 11TH FLOOR LOS ANGELES, CA 90025	STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
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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: [Signature] Addressed Person 12-12-2007 310-575-6047 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER Date			

STAPLE CHECK HERE