SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF Diane L. Stephanos, VP

DOCUMENT # A9300001071						
SUN LAND ACQUISITIONS, LTD.					FILLD SECRETARY OF STATE DIVISION OF CORPORATIONS	
Principal Place of Business Mailing Address 4500 PGA BOULEVARD. SUITE 400 4500 PGA BOULEVARD. SUIT PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL					00 APR 28 PM I2: 06 M	
2. Principal Place of Business						
500 PGA BLVD. 4500 PGA BLVD.					DO NOT WRITE IN THIS SPACE	
City & State		City & State Palm Beach Gardens, FL		, FL	4. FEI Number 65-0461058 Applied For Not Applicable	
Zip 33418	Country USA	Zip 33418	Count	ry USA	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current F	legistered Agent		Name	7. Name and Address of New Registered Agent	
DIVOSTA, OTTO B 4500 PGA BOULEVARD, SUITE 400 PALM BEACH GARDENS FL 33418				DIVOSTA, OTTO B. Street Address (P.O. Box Number is Not Acceptable)		
				City	4500 PGA BLVD., SUITE 303A	
	•				Palm Beach Gardens - 1 33416	
3. 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 Signature required when reinstating) DATE						
9. Capital Contributions as Shown on record. 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION						
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 # VAME STREET ADDRESS	P93000071498 SUN LAND ACQUISITIONS, INC. 4500 PGA BOULEVARD, SUITE 4	: ` ` ` NO	STRE	ET ADDRESS	4500 PGA BLVD., SUITE 303A	
CITY-ST-ZEP	PALM BEACH GARDENS FL 3341		CITY-	·ST-ZIP	Palm Beach Gardens, FL 33418	
DOCUMENT # NAME STREET ADDRESS			STRE	ET ADDRESS	<u>3000032687532</u> -05/26/0001085007	
CITY - ST - ZIP	 			ST-ZIP	****437.50 ****437.50	
VAME STREET ADDRESS				ET ADDRESS	2000022697522	
DOCUMENT#				ST-ZIP	3000032687582 -05/26/0001085008 *****88.75 *****88.75	
LAME STREET ADDRESS	."			et address •St•Zip		
CITY-ST-ZIP		<u> </u>	-	ET ADDRESS		
NAME STREET ADDRESS	· ·			ST-ZIP		
CITY-ST-ZIP			STRE	ET ADDRESS		
NAME Streigt address City-St-Zip			CITY	·ST-ZMP		
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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						