LIMITED
PARTNERSHIP
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # A9300001324  1. Name of Limited Partnership  Anspach Holdings, Ltd.				्या है। इस्त्रीय क्षित्र के स्टब्स	ALLORIDA			
, raiopaon no	.dgo, 2.d.					BK		
2. Principal Office Addr 4500 Riversio	•	3. Mailing Office Address 4500 Riverside Drive			4. Date Formed or Registered To Do Business In Florida 12/10/1993			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			<b>5.</b> FEI Number 650453225	Applied For Not Applicable		
City & State Palm Beach (	Gardens, FL	city & State Palm Beach Gardens, FL			CERTIFICATE OF STATUS DESIRED	for a Certaicate of Status		
<sub>Zip</sub> 33410	Country	<sub>ZIp</sub> 33410	Country USA		78. Capital Contributions as shown of	<sup>Record:</sup> 219,000		
33410	8. Name and Address of C				7b. Amount of Capital Contributions in FLORIDA to date: 219,000			
Name Eleine K	<del></del>	wrent Registered Agen			FEE			
Street Address (P.O. Box Number is Not Acceptable) 4500 Riverside Drive					1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.			
Suite, Apt. #, Etc.	le Dilve	<u></u>	<u>.                                    </u>		Supplemental Fee(s): \$88.75 for <u>each year due</u> this office, beginning with 1992 calendar year.     Panalty Fee(s): \$500 penalty fee for <u>each year report form is delinquent</u> .			
City Palm Beach Gardens State Zip Code FL 33410					Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental afficiavit must be submitted along with a separate and appropriate filing fee.			
9. Pursuant to the prevision for the purpose of chan agent. I am families with SIGNATURE (Registered Agents)	ging its registered office or register Cand accept the oblightings of sect	12, Florida Statules, the above ad agent, or both, in the State iorre20.192, Florida Statules.	-named limited partnersh of Florida. Such change	nip Organiz was autho	ed or registered under the laws of the State rized by its general partner(s). I hereby acc	of Florida, submits this statement sept the appointment of registered		
	PARTNER THAT IS	A CORPORATI	ON, LIMITED	PAR	TNERSHIP OR OTHER TH THIS OFFICE.	BUSINESS ENTITY		
10. Name(s) of Ge	eneral Partner(s)	Address of Each (Do NOT Use Post O	General Partner		City, State and Zip Code	10a. Registration Document Number		
Anspach Fixati	ion Devices, Inc.	4500 Riverside Drive		,	n Beach Gardens,	P94000007242		
		Br			100024 11/10/03010	5737 <b>11</b> 5-011 **1915.00		
RENSTATEMENT 200				03				
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Note: General p	artners MAY NOT be	e changed on this	s form: an am	endme	ent must be filed to chan	ge a general partner.		

11.	I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of
	Corporations from any liability of non-comptiance with Section 119.07(3)(i) 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 reportes required by chapter 620, Florida Statutes,
	trustee empowered to execute this export as required by chapter 620, Florida Statutes,

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Typed or Printed Name of General Partner Signing Form

Telephone Number 561-625-9112