

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS	
<div style="position: relative;"> <div style="position: absolute; top: 0; left: 0; font-size: 48px; font-weight: bold; color: black;">A96000000653</div> <div style="position: absolute; top: 0; left: 50%; transform: translate(-50%, -50%); font-size: 24px; font-weight: bold;">FILED</div> <div style="position: absolute; top: 0; left: 60%; font-size: 24px; font-weight: bold;">98 MAY -5 PM 2:27</div> </div>		DO NOT WRITE IN THIS SPACE.	
DOCUMENT # A96000000653			
1. Name of Limited Partnership Ware Family Investments, Ltd.			
2. Mailing Address c/o Denise Gordon Bessemer Trust Co. of Florida Suite, Apt. #, etc. 19th Floor 801 Brickell Avenue City & State Miami, Florida Zip 33131 Country		3. Principal Office Address c/o Denise Gordon Bessemer Trust Co. of Florida Suite, Apt. #, etc. 19th Floor 801 Brickell Avenue City & State Miami, Florida Zip 33131 Country	
4. Date Formed or Registered To Do Business in Florida 04/05/96		5. FEI Number 65-0663504	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		7. State or Country of Formation Florida	
8a. Capital Contributions as Shown on Record 3,168,000.00		FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.	
8b. Amount of Capital Contributions in FLORIDA to date: 3,168,000.00			
9. Name and Address of Current Registered Agent Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301		10. If changed, new registered agent/office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment) <i>Karen B. Rozar</i> Karen B. Rozar, As Its Agent 5-5-98			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Names of General Partner(s) Ware Investments, Inc.	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 147 Alhambra Circle	City, State and Zip Code Coral Gables, FL 33134	11a. Registration Document Number P96000025473
REINSTATEMENT 1998 <div style="font-size: 24px; font-weight: bold; border: 1px solid black; border-radius: 50%; width: 50px; height: 50px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> BK </div>			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.			
12. 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)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 <i>Rhoda C. Ware</i>		DATE 05/01/98	
Typed or Printed Name of General Partner Signing Form Rhoda C. Ware		Telephone Number (305) 372-5005	

CR2E039 (1/97)



THE UNITED STATES
CORPORATION
COMPANY

A9600000653

ACCOUNT NO. : 072100000032

REFERENCE : 806693 4303929

AUTHORIZATION

COST LIMIT

Patricia Puyik
\$ ~~1041.20~~

ORDER DATE : May 5, 1998

ORDER TIME : 12:14 PM

ORDER NO. : 806693-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Jazmine Roman
Greenberg Traurig
1221 Brickell Avenue

Miami, FL 33131

1026.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAY -5 PM 2:27

DOMESTIC FILINGS

NAME: WARE FAMILY INVESTMENTS, LTD.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Robert Maxwell

EXAMINER'S INITIALS _____

hrl 5/5/98

RECEIVED
98 MAY -5 PM 1:05
DIVISION OF CORPORATIONS