

(H07000120088)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 07 MAY - 1 PM 12:24 SECRETARY OF STATE TALLAHASSEE, FLORIDA CR2E039 (J87)	
DOCUMENT # A96000000914					
1. Name of Limited Partnership LEF/PALM-AIRE, LTD.					
2. Principal Office Address - No P.O. Box # One Greenway Plaza		3. Mailing Office Address One Greenway Plaza		4. Date Formed or Registered To Do Business in Florida 05/18/1996	
Suite, Apt. #, etc. Suite 850		Suite, Apt. #, etc. Suite 850		5. FEI Number 65-0681116	
City & State Houston, TX		City & State Houston, TX		Applied For ☐ Not Applicable	
Zip 77046	Country USA	Zip 77046	Country USA	6. CERTIFICATE OF STATUS DESIRED ☐	
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. ☐ A \$500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notice. By checking this box, you are certifying the prior notice were not received and requesting the \$500 penalty fee(s) be waived.					
8. Name and Address of Current Registered Agent: Name: BERKE, MICHAEL A. Street Address (P.O. Box Number is Not Acceptable): One S.E. Third Avenue Suite, Apt. #, Etc.: 28th Floor City: Miami State: FL Zip Code: 33131					
9. Pursuant to the provisions of section 620.1810 or 620.1815, 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): <i>[Signature]</i> DATE: 5-1-07 (REGISTERED AGENT MUST SIGN)					
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) LEF/PALM-AIRE, INC.		Address of Each General Partner (Do NOT List Post Office Box Numbers) One Greenway Plaza, Suite 850		City, State and Zip Code Houston, TX 77046	
REINSTATEMENT DB		2006-2007		10a. Registration Description Number	
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 re-examination with Chapter 119, F.S. In the event that the information supplied is determined 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>[Signature]</i>		DATE 5-1-07		Telephone Number 305-755-5855	
Typed or Printed Name of General Partner Signing Form LEONARD E. FRIEDMAN					

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Jerry C. Senterfitt, P.A.
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LP/LLP REINSTATEMENT

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