

# 2008 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A96000001233

1. Entity Name  
CSC-NOB HILL, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

08 APR -1 PM 3:44

Principal Place of Business  
250 AUSTRALIAN AVENUE SOUTH, 10TH FLOOR  
SUITE 1003  
WEST PALM BEACH, FL 33401

Mailing Address  
250 AUSTRALIAN AVENUE SOUTH, 10TH FLOOR  
SUITE 1003  
WEST PALM BEACH, FL 33401



2. Principal Place of Business - No P.O. Box #  
1801 S. Australian Ave

3. Mailing Address  
1801 S. Australian Ave

Suite, Apt. #, etc.  
City & State  
West Palm Beach FL

Suite, Apt. #, etc.  
City & State  
West Palm Beach FL

Zip  
33409

Country  
US

Zip  
33409

Country

03132008 REIN-LP CR2E100 (1/07)

4. FEI Number  
11-3326082

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CEEBRAID WINTER PARK CORPORATION  
250 AUSTRALIAN AVENUE SOUTH, 10TH FLOOR  
SUITE 1003  
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
1801 South Australian Ave  
City  
West Palm Beach FL Zip Code  
33409

8. Pursuant to the provisions of Section 620.18(10) or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

DATE

FILE NOW!!! FEE IS \$1000.00

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

DOCUMENT #  
NAME  
CSC-NOB HILL, LTD.  
STREET ADDRESS  
250 AUSTRALIAN AVENUE SOUTH, 10 FL. ST. 1003  
CITY-ST-ZIP  
WEST PALM BEACH, FL 33401

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
1801 South Australian Ave  
CITY-ST-ZIP  
West Palm Beach FL 33409

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03/20/08--01050--014 \*\*1000.00

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE