

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2001-2003
LIMITED
PARTNERSHIP
REINSTATEMENT
WR

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 AUG 18 PM 3:52

WR 8/20

DOCUMENT # A99000001258

1. Name of Limited Partnership
Greenwell Investments Limited Partnership

2. Principal Office Address
44 Brams Point Road

3. Mailing Office Address
2101 NW Corporate Blvd.

4. Date Formed or Registered
To Do Business in Florida **07/30/99**

5. FEI Number
65-0936926

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7a. Capital Contributions as shown on Record: **\$60,000,000**

7b. Amount of Capital Contributions in FLORIDA to date: **\$8,000,000**

8. Name and Address of Current Registered Agent

Name **M & W Agents, Inc.**

Street Address (P.O. Box Number is Not Acceptable)
2101 NW Corporate Blvd.

Suite, Apt. #, Etc. **Ste. 107**

City **Boca Raton** State **FL** Zip Code **33431**

9. 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) _____ DATE _____

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Greenwell Investments, Inc.	2101 NW Corporate Blvd., Ste. 107	Boca Raton, FL 33431	P99000068024

600022370836
08/18/03--01021--005 **1578.75

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 exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance 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 effect 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 **Greenwell Investments, Inc., Gen. Ptnr.** DATE **8/9/03**

Typed or Printed Name of General Partner Signing Form Telephone Number **843-681-8080**

CR2E039 (10/02)

292

TESCHER GUTTER CHAVES JOSEPHER RUBIN RUFFIN & FORMAN, P.A.

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August 15, 2003

Division of Corporations
Attn: Partnership Section
Post Office Box 6327
Tallahassee, FL 32314

Re: Greenwell Investments Limited Partnership-A99000001258

Dear Sir or Madam:

Enclosed is a form to reinstate the referenced partnership, together with a check in the amount of \$1,578.75 representing filing fees due. The reinstatement fee is not included, since a change of address was submitted but apparently was not processed by your offices. The enclosed form reflects the correct address.

We respectfully request that the reinstatement fee be waived and, unless we are notified otherwise by you, we will assume that this request has been granted.

Thank you in advance for your consideration.

Sincerely yours,

DONALD R. TESCHER

DRT/dd

Enclosures

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS