

2001 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 OCT 22 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A 99000001595

1. Name of Limited Partnership

MARVIN ROSS FRIEDMAN FAMILY LIMITED PARTNERSHIP

2. Principal Office Address

2600 Douglas Road

Suite, Apt. #, etc.

Suite 1011

City & State

Coral Gables

Zip

FL

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

33134

Country

4. Date Formed or Registered
To Do Business in Florida

9/27/99

5. FEI Number

65-0930971

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7a. Capital Contributions as shown on Record:

\$4,950,000.00

7b. Amount of Capital Contributions in FLORIDA to date:

\$4,950,000.00

FEES:

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.

2.) Supplemental Fee(s): \$88.75 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 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8. Name and Address of Current Registered Agent

Name

Michael S. Singer, Esquire

Street Address (P.O. Box Number is Not Acceptable)

3801 PGA Blvd.

Suite, Apt. #, Etc.

Suite 802

City

Palm Beach Gardens

State

FL

Zip Code

33410

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.

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-10/20/01--01093--003

SIGNATURE (Registered Agent Accepting Appointment)

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

Marvin Ross Friedman
Trustee of the Marvin Ross
Friedman Revocable Trust
dated 2/20/1997

2600 Douglas Rd.
#1011

Coral Gables, FL 33134

A99000001595

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 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

Marvin Ross Friedman

DATE

10-17-01

Typed or Printed Name of General Partner Signing Form

Marvin Ross Friedman, Trustee

Telephone Number

305/446-6485

CR2E039 (9/01)

AFFIDAVIT

STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared , **MARVIN ROSS FRIEDMAN**, who after first being duly sworn deposes and says:

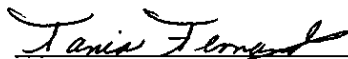
1. That I am the Trustee of the Marvin Ross Friedman Revocable Trust and Principal of the Marvin Ross Friedman Family Limited Partnership.
2. That I have never received any renewal certificate or notice of fees due from the Secretary of State, Division of Corporations.
3. That the first and only notice that I ever received regarding the Marvin Ross Friedman Family Limited Partnership filing was the revocation of the limited partnership, which was mailed to me on October 12, 2001 and received on October 15, 2001.

FURTHER AFFIANT SAYETH NOT.



MARVIN ROSS FRIEDMAN, TRUSTEE

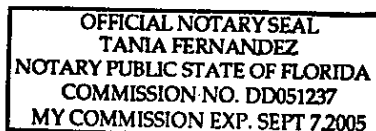
SWORN TO and SUBSCRIBED before me this 17th day of October, 2001



NOTARY PUBLIC - STATE OF FLORIDA

My Commission Expires:

Personally Known: ✓ or
Produced Identification: _____



MARVIN ROSS FRIEDMAN FAMILY LIMITED PARTNERSHIP

*2600 Douglas Road, Suite 1011
Coral Gables, FL 33134*

October 17, 2001

Division of Corporations
Attn: Partnership Section
P. O. Box 6327
Tallahassee, FL 32314

RE: Marvin Ross Friedman Family Limited Partnership
Document # A99000001595

Ladies and Gentlemen:

Enclosed herewith is the limited partnership reinstatement form for the Marvin Ross Friedman Family Limited Partnership. I am also enclosing my check in the amount of \$526.25 for fees together with an Affidavit indicating that the undersigned has never received the yearly form for renewal and payment of fees and that the first notice received as to any amount due was the revocation of the limited partnership.

Kindly issue a Certificate of Status to the undersigned showing this to be an active limited partnership.

Very truly yours,



MARVIN ROSS FRIEDMAN, TRUSTEE

MRF:tf
Enc.

CERTIFIED MAIL - R/R/R - 7001 1140 0001 5477 4361