

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
 04 NOV 12 AM 10:43
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Handwritten initials

DOCUMENT # B01000000089

1. Name of Limited Partnership
DARR PROPERTIES L.P.

2. Principal Office Address
1111 West 40th Street

3. Mailing Office Address
222 N. LaSalle Street

4. Date Formed or Registered To Do Business in Florida 3/14/01

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Eighth Floor

5. FEI Number 36-4211778
Applied For Not Applicable

City & State
Chicago, IL

City & State
Chicago, IL

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

Zip 60609 **Country** USA

Zip 60601 **Country** USA

7a. Capital Contributions as shown on Record: \$1,000.00

7b. Amount of Capital Contributions in FLORIDA to date: \$1000.00

8. Name and Address of Current Registered Agent

Name NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
526 East Park Avenue

Suite, Apt. #, Etc.

City Tallahassee

State FL **Zip Code** 32301

FEES:

- 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.
 - Supplemental Fee(s): \$88.75 for **each year due** this office, beginning with 1992 calendar year.
 - 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.

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
Superior Nut & Candy Company, Inc. - Central	1111 West 40th Street	Chicago, IL 60609	F0100001411
			200042907532 11/19/04--01057--029 **\$88.75
			200042907532 11/19/04--01057--030 **\$52.50

REINSTATEMENT 2004

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 *Anthony Mastrangelo* DATE 11/4/04
 Typed or Printed Name of General Partner Signing Form **Anthony Mastrangelo, President of GP** Telephone Number (312) 894-1631

CR2E039 (10/02)

BUI00000089

DARR PROPERTIES, LP
1111 West 40th Street
Chicago, Illinois 60609

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Florida Department of State
Secretary of State
Division of Corporations

To whom it may concern:

With this letter, we are filing a Limited Partnership Reinstatement for Darr Properties L.P. We have never received the 2004 annual report form and so failed to file the report which we understand was to be mailed to us directly at the address above. Since we have not received the expected report, we request that the \$500.00 penalty fee be waived.

Thank you for your attention to this matter.

Very truly yours,

SUPERIOR NUT & CANDY COMPANY,
Inc. - CENTRAL, General Partner

Anthony Mastrangelo, President

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