Mar-25-2003 03pm [illegible] T-008 P.002/00[illegible] F-308

B01000000215

1 of 2

PLEASE READ [illegible] FOR COMPLETING THIS FORM.

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03 MAR 25 PM 3:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # B01000000215

1. Name of Limited Partnership
Seabreeze Partners, L.P.

2. Principal Office Address	3. Mailing Office Address
411 Seabreeze Avenue	411 Seabreeze Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palm Beach, FL	City & State: Palm Beach, FL
Zip: 33480 Country: Palm Beach	Zip: 33480 Country: Palm Beach

4. Date Formed or Registered To Do Business in Florida: 06/20/2001

5. FEI Number: 65-1111070 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $[illegible]

7a. Capital Contributions as shown on Record: $100,000

7b. Amount of Capital Contributions in FLORIDA to date: $100,000

8. Name and Address of Current Registered Agent

Name: Douglas A. Kass

Street Address (P.O. Box Number is Not Acceptable): 411 Seabreeze Avenue

Suite, Apt. #, Etc.

City: Palm Beach State: FL Zip Code: 33480

FEES:
1.) Filing Fee(s). Computed as 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 the office.
2.) Supplemental Fee(s). $88.75 for each year due the 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.

9. Pursuant to the provisions of sections 620.1081 and 620.182, 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 620.182, 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
Seabreeze Partners Management, Inc.	411 Seabreeze Avenue	Palm Beach, FL 33480	F01000003292

3/25 West

2002 - 2003

REINSTATEMENT

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 this 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 _____ DATE 3/10/03

Typed or Printed Name of General Partner Signing Form: Douglas A. Kass, President of GP Telephone Number: 561 835 9639

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Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

From:
Account Name : GREENBERG TRAURIG (WEST PALM BEACH)
Account Number : 075201001473
Phone : (561)650-7900
Fax Number : (561)655-6222

LIMITED PARTNERSHIP REINSTATEMENT

SEABREEZE PARTNERS, L.P.

Resent 3-25-03

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