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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

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Account Name : C T CORPORATION SYSTEM
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8713805

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**LP/LLP REINSTATEMENT
UNA VEZ MAS, LP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$3,000.00

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>1309000000523</u>			
1. Name of Limited Partnership UNA VEZ MAS, LP			
2. Principal Office Address (No P.O. Box #) 703 McKinney Avenue		3. Mailing Office Address 703 McKinney Avenue	
Suite, Apt. #, etc. Suite 240		Suite, Apt. #, etc. Suite 240	
City & State Dallas, TX		City & State Dallas, TX	
Zip 75202	Country USA	Zip 75202	Country USA
4. Date Formed or Registered To Do Business in Florida 12/08/05			
5. FEI Number 27-0135016		Applied For ☐ Not Applicable	
6. CERTIFICATE OR STATUS REQUIRED ☐ 10.75 Additional Fee required for a Certificate of Status			
7. FEES: Filing Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$88.75 for each year due this office. Penalty Fee(s): \$300 for each year or part thereof limited partnership revoked on our records.			
8. Name and Address of Current Registered Agent Name Capitol Corporate Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 155 Office Plaza Dr. Suite, Apt. #, etc. Suite A City Tallahassee FL 32301		E-mail Address regagent@capitolcorporate.com	
9. I forward to the provisions of section 820.1410 or 820.1420, Florida Statutes, I hereby accept the appointment of registered agent, I am familiar with and accept the obligations of Chapter 820, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) <u>Debbie Case</u> Debbie Case, Asst. Sec. on DATE <u>3/22/2013</u> (REGISTERED AGENT MUST SIGN) behalf of Capitol Corporate Services, Inc.			
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 Number)	City, State and Zip Code	10a. Registration Document Number
Una Vez Mas GR, LLC	703 McKinney Avenue Suite 240	Dallas, TX 75202	MD6000006702
REINSTATEMENT <u>2011-2013</u> <u>BK</u>			
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 submitted with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I file on the Division of Corporations with my filing of this certificate with Chapter 119, FS. In the event that the information supplied is deemed exempt from public access, I further certify that the information is not exempt from public access 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, secretary or trustee or authorized to execute this report or would be charged with the duty to file this information in a document to the Department of State pursuant to a third degree felony as provided for in 817.124, FS.			
SIGNATURE <u>Debbie Case</u>		DATE <u>3/18/13</u>	
Typed or Printed Name of General Partner Signing Form		Telephone Number	

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