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2007 MAY -9 A 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # B94000000115

1. Entity Name
SUN COMMUNITIES OPERATING LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
27777 FRANKLIN RD., STE 200 SOUTHFIELD, MI 48034	27777 FRANKLIN RD., STE 200 SOUTHFIELD, MI 48034

05012007 REIN-LP CR2E100 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. # etc	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 38-3144240 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE STE 4 WESTON, FL 33331	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. Pursuant to the provisions of section 620.1810 or 620.1909 Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE: Sue Johnson, SUE JOHNSON, asst. Secretary DATE: 5-8-07

FILE NOW!!! FEE IS $2000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F93000005373 SUN COMMUNITIES, INC. 27777 FRANKLIN RD., STE 200 SOUTHFIELD, MI 48034	STREET ADDRESS CITY-ST-ZIP	
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: [signature] 5/8/07 248.208.2500

(SIGNATURE AND TYPED OR PRINTED NAME OF RICHARD SOKOLOV, PARTNER) (Date) (Daytime Phone #)

2062

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Florida Department of State
Division of Corporations
Public Access System

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TALLAHASSEE, FLORIDA

LP/LLLP REINSTATEMENT

SUN COMMUNITIES OPERATING LIMITED PARTNERSHIP

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