

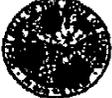
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>B97000000576</u>			
1. Name of Limited Partnership CMD/Pund III GP Investments, L.P. 303 W. Madison Street, Suite 1900 Chicago, IL 60606			
2. Principal Office Address 303 W. Madison Street Suite, Apt. #, etc. 1900 City & State Chicago, Illinois Zip Country 60606 Cook		3. Mailing Office Address 303 W. Madison Street Suite, Apt. #, etc. 1900 City & State Chicago, Illinois Zip Country 60606 Cook	
4. Date Formed or Registered To Do Business in Florida <u>10/28/1997</u>		5. FEI Number 364184138	
6. CERTIFICATE OF STATUS DESIRED		Applied For Not Applicable	
7a. Capital Contributions as shown on Record: <u>50.00</u>			
7b. Amount of Capital Contributions in FLORIDA to date: <u>0.00</u>			
8. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Suite, Apt. #, Etc. City State Zip Code Tallahassee FL 32301-2525			
9. Pursuant to the provisions of sections 620, 6031 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) or partners 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) <u>Cynthia L. Harris</u> as its agent DATE <u>10/11/05</u>			
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) CMD REIM III, Inc.		10a. Registration Document Number 997000003653	
Address of Each General Partner (Do NOT Use Post Office Box Numbers) 303 W. Madison Street Suite 1900		City, State and Zip Code Chicago, Illinois 60606	
REINSTATEMENT 05 AL			
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)(c), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(c) 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 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 <u>Sarah A. Richardson</u>		DATE <u>10/11/05</u>	
Typed or Printed Name of General Partner Signing Form <u>Sarah A. Richardson, Secretary</u>		Telephone Number <u>912 619 9500</u>	

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Florida Department of State
Division of Corporations
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LIMITED PARTNERSHIP REINSTATEMENT

CMD/FUND III GP INVESTMENTS, L.P.

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