

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JUL 23 PM 1:42

DOCUMENT # Grand Cru Property Four L.P.
1. Name of Limited Partnership

B97000000584

4/16/99

DO NOT WRITE IN THIS SPACE

2. Mailing Address 420 Lexington Ave. Suite, Apt #, etc. Suite 900 City & State New York Zip 10170 Country USA		3. Principal Office Address 420 Lexington Avenue Suite, Apt #, etc. Suite 900 City & State New York, New York Zip 10170 Country USA		4. Date Formed or Registered To Do Business in Florida	5. Fil Number 13-3974471 Applied For Not Applicable
8a. Capital Contributions as Shown on Record \$100.00		8b. Amount of Capital Contributions in FLORIDA to date \$100.00		6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status	
7. State or Country of Formation Delaware					

9. Name and Address of Current Registered Agent Coporation Service Company 1201 Hayes Street Tallahassee, FL 32301		10. If changed, new registered agent/office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City FL Zip Code	
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10a. 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.**

11. Names of General Partner(s) Grand Cru Villa GP LLC	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 420 Lexington Ave. Suite 900	City, State and Zip Code New York, New York 10170	11a. Registration Document Number 1M97000000714
REINSTATEMENT 1999 (BKC)		500002939985--9	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 Grand Cru Village GP LLC, general partner

DATE

7/21/99

Typed or Printed Name of General Partner Signing Form

S. Lawrence Davis, Authorized Signatory Telephone Number 212-212-8400

CR2E039 (1/97)



THE UNITED STATES
CORPORATION
COMPANY

B97000000584

ACCOUNT NO. : 0721000000032

REFERENCE : 315617 5024472

AUTHORIZATION :

COST LIMIT : \$ 641.25

Taberna Pajits

ORDER DATE : July 22, 1999

ORDER TIME : 10:23 AM

ORDER NO. : 315617-005

CUSTOMER NO: 5024472

CUSTOMER: Michele Penaranda, Legal Asst
SOLOMON AND WEINBERG LLP
SOLOMON AND WEINBERG LLP
70 East 55th Street

New York, NY 10022

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUL 23 PM 1:42

DOMESTIC FILING

NAME: GRAND CRU PROPERTY FOUR L.P.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS: _____

NK 7/23/99