B98000000633

APPLICATION OF REINSTATEMENT FOR LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAY 10 PM 2:19

DOCUMENT # B98000000633

1. Name of Limited Partnership
(Cross Ref. ANL, L.P.) ANL Jacksonville, Ltd.

DO NOT WRITE IN THIS SPACE

2. Mailing Address	3. Principal Office Address	4. Date Formed or Registered To Do Business in Florida
One Rockefeller Plaza	One Rockefeller Plaza	10-27-98
Suite, Apt. #, etc.: 32nd floor	Suite, Apt. #, etc.: 32nd floor	5. FEI Number: 59-3503188 (Applied for / Not Applicable)
City & State: New York, New York	City & State: New York, New York	6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status
Zip: 10020 Country:	Zip: 10020 Country:	7. State or Country of Formation: Delaware

8a. Capital Contributions as Shown on Record: 99.00

8b. Amount of Capital Contributions in FLORIDA to date: 99.00

FEES: 1) Filing Fee(s): Computed at a rate of $7 per $1,000 on amount entered in 8b, with a minimum filing fee of $52.50 and a maximum of $437.50, for each year due this office
2) Supplemental Fee(s): $88.75 for each year due this 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 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee

9. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

10. If changed, new registered agent/office

Name: Asbury Jax Management, L.L.C.
Street Address (P.O. Box Number Is Not Acceptable): 4306 Pablo Oaks Court
Suite, Apt. #, etc.:
City: Jacksonville FL Zip Code: 32224

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): Linda L Marlette DATE: 5.6.99

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration Document Number
Asbury Jax Management, L.L.C.	One Rockefeller Plaza 32nd floor	New York, New York 10020	M98000001272

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CR2E035(12/96)

REINSTATEMENT 10/10/1

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)(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 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: Linda L Marlette DATE: 5.6.99

Typed or Printed Name of General Partner Signing Form: Linda L. Marlette, Treasurer Asbury Jax Management, L.L.C. 904-992-4110