

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2005 DEC 29 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000000412

1. Corporation Name

215 AIRPORT PULLING ROAD, INC.

03

2. Principal Office Address

30 Broad Street, 31st Floor

Suite, Apt. #, etc.

c/o UrbanAmerica, L.P.

City & State

New York, NY

Zip

10004

Country

USA

3. Mailing Office Address

30 Broad Street, 31st Floor

Suite, Apt. #, etc.

c/o UrbanAmerica, L.P.

City & State

New York, NY

Zip

10004

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/24/2000

5. FEI Number

58-2516337

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

300062473473

CR2E081 (8/05)

7. 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

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Cynthia L. Harris

Cynthia L. Harris
as its agent

Date

12/29/05

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| PSTD | Hal Reiff | 30 Broad Street, 31st Floor | New York, NY 10004 |
| | | | |
| | | | |
| | | | |
| | | | |
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REINSTATEMENT 2003-2005

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE *Robert Stark*

ROBERT STARK
Vice President, Asset Management

12/29/05 (212) 612-9091

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



F00000000412

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 783948 5170790

AUTHORIZATION :

COST LIMIT : \$ 1058.75

FILED
2005 DEC 29 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : December 29, 2005

ORDER TIME : 10:59 AM

ORDER NO. : 783948-155

CUSTOMER NO: 5170790

hfe

REINSTATEMENT

NAME: 215 AIRPORT PULLING ROAD, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris EXT 2937

EXAMINER'S INITIALS _____

RECEIVED
05 DEC 29 PM 12:55
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA