SEP-17-2004 10:06 CT CORPORATION

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 SEP 15 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

DOCUMENT # F00000005211

1. Corporation Name
BCM/CHI Eden Roc, Inc

299 Park Avenue
299 Park Avenue

2. Principal Office Address		3. Mailing Office Address	
299 Park Avenue		299 Park Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Fl 21-23 c/o Blackacre Cap. Mgt		Fl 21-23 c/o Blackacre Cap. Mgt	
City & State		City & State	
New York, NY		New York, NY	
Zip	Country	Zip	Country
10171	USA	10171	USA

4. Date Incorporated or Qualified To Do Business in Florida 9/18/00

5. FEI Number 52-2263241 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CT Corporation

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City: Plantation | State: FL | Zip Code: 33324

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: Lauren Kreatz — LAUREN H. KREATZ, ASSISTANT SECRETARY — Date: 9/15/04

REGISTERED AGENT - OFFICIAL

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
PTD	Ronald Kravit	299 Park Ave, FL 21-23	New York, NY 10171
VSD	Jeffrey Citrin	299 Park Ave, FL 21-23	New York, NY 10171
IO	Kenneth Uva	1209 Orange Street	Wilmington, DE 19801

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: _____ 9/14/04 9785227004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TOTAL P.02

SEP-17-2004 10:05 CT CORPORATION
Division of Corporations

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

BCM/CHI EDEN ROC, INC.

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Please backdate to Wed 9/15/04 per original request Thanks!

9/15/04