

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV -5 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000001168

1. Corporation Name

ILM PALMS HOLDING, INC.

Principal Place of Business

Mailing Address

1285 Avenue of the Americas
New York, New York 10019

REINSTATEMENT 97-98

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

28 State Street, Suite 1100

Suite, Apt. #, etc.

Suite 1100

City & State

Boston, MA

Zip

02109

Country

USA

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3-8-94

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres.	David Carlson	28 State Street, Suite 1100	Boston, MA 02109
Secry.	Jeffrey R. Dwyer, Esq.	1300 Connecticut Avenue, NW Suite 1000	Washington, D.C. 20036
V.P.	Julien G. Redelev	211 N. Union Street, Suite 111	Alexandria, VA 22314
Dir.	Julien G. Redelev	211 N. Union Street, Suite 111	Alexandria, VA 22314
Dir.	Jeffrey R. Dwyer, Esq.	1300 Connecticut Avenue, NW Suite 1000	Washington, D.C. 20036

8. Name and Address of Current Registered Agent

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

9. Name and Address of New 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

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date November, 1998

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Carlson, President

11/3/98 (617)573-5035

Date

Daytime Phone

000002680050-8

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RECEIVED

ACCOUNT NO. : 0721000000325 AM 9:26

REFERENCE : 983149-005 OF CORPORATION

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 900.00

ORDER DATE : October 2, 1998

ORDER TIME : 9:30 AM

ORDER NO. : 983149-005

CUSTOMER NO: 7166305

CUSTOMER: David Carlson, President
ILM HOLDING, INC.
ILM HOLDING, INC.
28 State Street, Suite 1100
Boston, MA 02109

FOREIGN REINSTATEMENT

NAME: ILM PALMS HOLDING, INC.

EFFECTIVE DATE:

XX FOREIGN REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS: _____

RECEIVED
98 NOV 14 AM 11:29
DIVISION OF CORPORATION

FILE 1ST