

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



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

FILED

OCT 29 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Limited Liability Company's Name

L-12028

Mallards Landing, LLC

2. Principal Office Address

319 Clematis St

Suite, Apt. #, etc.

901

City & State

West Palm Beach FL

Zip

33401

Country

USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

REINSTATEMENT 2001

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

Sept 29 2000

6. FEI Number

06-1605429

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

The Richman Group of Florida, Inc.

Street Address (P.O. Box Number is Not Acceptable)

319 Clematis St.

20000466572-3

Suite, Apt. #, Etc.

901

11/06/01-01001-026

****150.00 ****150.00

City

West Palm Beach FL

State

FL

Zip Code

33401

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

[Signature] President

REGISTERED AGENT MUST SIGN

Date 10/16/01

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Mallards Landing, Inc.	599 West Putnam Ave. Greenwich	Greenwich, CT 06830
Investor Member	U.S.A. Institutional Tax Credit Fund XXV L.P.	599 West Putnam Ave.	Greenwich, CT 06830
Class B Member	Richelson Enterprises, LLC	4 New King Street	White Plains, NY 10604

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of
Managing Member/Manager

[Signature] President of Mallards
Landing, Inc.

Date 10/16/01

Daytime Phone # 203-869-0908

Typed or printed name of signing Managing Member/Manager

Kristen Hilde

CR2E041 (9/01)