

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000017082

FILED
Mar 24, 2008
Secretary of State

Entity Name: FLORIDA HOUSING PARTNERS, LLC

Current Principal Place of Business:

6450 SOUTHWEST NINETY-FOURTH ST.
MIAMI, FL 33156

New Principal Place of Business:

C/O MASSIRMAN GROUP
444 BRICKELL AVENUE, #340
MIAMI, FL 33131

Current Mailing Address:

6450 SOUTHWEST NINETY-FOURTH ST.
MIAMI, FL 33156

New Mailing Address:

C/O MASSIRMAN GROUP
444 BRICKELL AVENUE, #340
MIAMI, FL 33131

FEI Number: 66-1150199 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DEVINE GOODMAN PALLOT & WELLS, P.A.
777 BRICKELL AVENUE, SUITE 850
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MASSIRMAN, JAY H
444 BRICKELL AVENUE
#340
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAY H MASSIRMAN

03/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MASSIRMAN, JAY H
Address: 6450 SW 94TH STREET
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MASSIRMAN, JAY H
Address: 444 BRICKELL AVENUE, #340
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAY H. MASSIRMAN

MGRM

03/24/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date