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LIMITED LIABILITY REINSTATEMENT

MIAMI BEACH HOTEL INVESTORS LLC

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LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS																									
DOCUMENT # <u>L0200000 2350</u> 1. Limited Liability Company's Name MIAMI BEACH HOTEL INVESTORS LLC																											
2. Principal Office Address 4385 COLLINS AVENUE		3. Mailing Office Address 4385 COLLINS AVENUE																									
4. State/Country of Formation FL		5. Date Organized or Qualified To Do Business in Florida JANUARY 30, 2002																									
6. State, Apt. #, etc. ATTN: ANTHONY BROWN		7. City & State MIAMI BEACH, FL																									
8. City & State MIAMI BEACH, FL		9. ZIP 33140																									
10. Country USA		11. State, Apt. #, etc. SUITE 800																									
12. City WEST PALM BEACH		13. State FL																									
14. ZIP 33401		15. Country USA																									
16. Name and Address of Current Registered Agent Name: ROSEN, MARVIN S. Street Address (P.O. Box Number is Not Acceptable): 222 LAKEVIEW AVE State, Apt. #, etc.: SUITE 800 City: WEST PALM BEACH																											
17. Signature of Registered Agent: <u>Marvin S. Rosen</u> Date: <u>3/27/05</u> REGISTERED AGENT MUST SIGN																											
18. Names and Street Addresses of Managing Members/Managers <table border="1"> <thead> <tr> <th>THAT</th> <th>Name of Managing Member/Manager</th> <th>Street Address of Each Managing Member/Manager</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGR</td> <td>MIAMI BEACH HOTEL MANAGER, LLC</td> <td>4385 COLLINS AVENUE</td> <td>MIAMI BEACH, FL 33140</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				THAT	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip	MGR	MIAMI BEACH HOTEL MANAGER, LLC	4385 COLLINS AVENUE	MIAMI BEACH, FL 33140																
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19. I certify that I am the managing member/manager of the receiver or trustee empowered to execute this application as provided for in chapter 006, 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 805.06, 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: <u>Harry S. Rosen</u> Date: <u>3/27/05</u> Daytime Phone: <u>305 531 3352</u> Typed or printed name of signing Managing Member/Manager: <u>Harry S. Rosen</u>																											

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