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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2004 OCT 13 A 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000005865

1. Limited Liability Company's Name

CCMSC 2000-1 Broward Plaza, LLC

2. Principal Office Address	3. Mailing Office Address
1601 Washington Avenue	Same
Suite, Apt. #, etc. 700	Suite, Apt. #, etc.
City & State Miami Beach, FL	City & State
Zip 33139 / County	Zip / County

4. State/Country of Formation: Florida

5. Date Organized or Qualified To Do Business in Florida: 3/12/02

6. FEI Number: 61-1410506 — Applied For / Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

8. Name and Address of Current Registered Agent

Name: CT Corporation System

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

Suite, Apt. #, Etc.:

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

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: _____ REGISTERED AGENT MUST SIGN — PETER F. SOUZA, ASSISTANT SECRETARY — Date: 10/13/04

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Lennar Partners, Inc.	1601 Washington Avenue	Miami Beach, FL 33139

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REINSTATEMENT 04

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 608.408, F.S., and that all taxes 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: _____ Date: 10/11/04 Daytime Phone # 305-695-5600

Typed or printed name of signing Managing Member/Manager: Randolph J. Wolpert, Vice President, Lennar Partners, Inc.

FLR170 - 05/03/04 CT System Online

2062

Florida Department of State
Division of Corporations
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LIMITED LIABILITY REINSTATEMENT

CCMSC 2000-1 BROWARD PLAZA, LLC

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