1. Limited Liability Company's Name URBAN PARTNERS 17 HOUSES, LLC 2. Principal Office Address 701 Brickell Avenue 70 Business in Florida 70 De Business in	~ ,	PLEASE READ A	ALL INSTRU	CTIONS BE	FORE C	OMPLETI	NG THIS	S FORM.		
Suite, Apt. #, etc. Suite 2040 Suite 304 Suite 333131 USA Suite 2040 Suite 304 Suite 404	COMPANY Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS									
Suite, Apt. #, etc. Suite 2040 Suite 304 Suite 333131 USA Suite 2040 Suite 304 Suite 404	DOCUMENT # L03000018129 1. Limited Liability Company's Name URBAN PARTNERS 17 HOUSES, LLC						3	OS MAR 24 PY		
Suite 2040 Miami, FL 33131 Suite 2040 Miami, FL 33131 Suite 2040 Miami, FL 33131 Suite 2040 Suite 2040 Miami, FL 33131 Suite 2040 Miami, FL 331					4. State/Country of Formation					
Miami, FL	Suite 2040 Suite 2			<u> </u>			5. Date Organized or Qualified			
8. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) 120 E. Palmetto Park Road	Miami	, FL	Miami, FL	liami, FL			20-2467702 Not Applicable			
Name Jonathan J. Lichtman, P.A.			l -	1 -		CERTIFICATE	OF STATUS D			
Jonathan J. Lichtman, P.A. Street Address (P.O. Box Number is Not Acceptable) 120 E. Palmetto Park Road State Suite 100 City Boca Ration Signature of Registered Agent Registered Address of Each Registered Address of Each Managing Members/Managers Titles Managing Members/Managers Titles Managing Members/Managers Total Brickell Avenue, Suite 2040 Miami, FL 33131 COO Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 S Justin DalMolin 701 Brickell Avenue, Suite 2040 D Justin DalMolin 701 Brickell A		8. Name and Address of Current Registered Agent								
Suite, Apt. #, Etc. Suite 100 City Boca Raton State Zip Code FL 33432 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 REGISPERED AGENT MUST SIGN 10. Names and Street Address of Managing Members/Managers Titles Managing Members/Managers Name of Managing Members/Managers Name of Managing Members/Managers Total Brickell Avenue, Suite 2040 Miami, FL 33131 COO Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 CFO Justin DalMolin 701 Brickell Avenue, Suite 2040 Miami, FL 33131 SJUDI 4936999 STATENENT 2003 23 105-01054-025 ***205.00 11. Locatify 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 cath. Signature of Menaging Member/Mañager Lustin DalMolin Date 3/4/05 Daytime Phone # (305) 357-5576		Jonathan J. Lichtman, P.A.								
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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 filling 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 Date Daytime Phone # (305) 357-5576	CFO	Justin DalMolin		701 Brickell Avenue, Suite 2040			Miami, FL 33131			
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Justin DalMolin					3/4,	/05	Daytime Phone	,# (305) 357-5	576	
	Typed or pri	inted name of signing Managing Member/	ManagerJustin [DalMolin						