2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000052249

Entity Name: MAYFAIR LOFTS, LLC

FILED Dec 22, 2006 Secretary of State

Current Principal Place of Business:

C/O MARIO IGLESIAS, ESQ

350 E. LAS OLAS BLVD., SUITE 1600 FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

New Mailing Address:

1200 BRICKELL AVE SUITE 900

1200 BRICKELL AVE

MIAMI, FL 33131

SUITE 900

MIAMI, FL 33131 US C/O MARIO IGLESIAS, ESQ. 350 E. LAS OLAS BLVD., SUITE 1600 FORT LAUDERDALE, FL 33301

FEI Number: 20-0690900

FEI Number Applied For ()

FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

AGI REGISTERED AGENTS, INC 1200 BRICKELL AVENUE, SUITE 900

MIAMI, FL 33131 US AMERICAN INFORMATION SERVICES, INC. 350 E. LAS OLAS BLVD. SUITE 1600

FORT LAUDERDALE, FL 33301 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: DIANA M. GUERRA, ASSISTANT SECRETARY

12/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

() Delete

MAYFAIR HOLDINGS, LL, C Name:

Address: C/O 1200 BRICKELL AVENUE #900 City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES:

Title: (X) Change () Addition

MAYFAIR HOLDINGS, LL, C Name:

Address: 119 VICTOR HEIGHTS PARKWAY City-St-Zip: VICTOR, NY 14564 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID F. CHRISTA, MANAGER OF THE MANAGER

MGR

12/22/2006