

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

06 FEB -8 AM 10:55

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Limited Liability Company's Name
Jamaica Lane LLC

L04000011611

2. Principal Office Address
225 Jamaica Lane

Suite, Apt. #, etc.
N.A.

City & State
Palm Beach, FL

Zip
33480-3321

Country
USA

3. Mailing Office Address
c/o John Stiefel, Freeborn & Peters

Suite, Apt. #, etc.
311 South Wacker, Suite 3000

City & State
Chicago, IL

Zip
60606

Country
USA

4. State/Country of Formation
Florida

5. Date Organized or Qualified
To Do Business in Florida 02/11/2004

6. FEI Number

Applied For
☒ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)
c/o C T Corporation System, 1200 South Pine Island Road

Suite, Apt. #, Etc.
N.A.

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

James M. Halpin
Assistant Secretary

Date January 31, 2006

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MBR	Scott Vesley	225 Jamaica Lane	Palm Beach, FL 33480-3321

REINSTATEMENT 05-06

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 608.406, 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 02/01/2006

Daytime Phone# 312-640-9041

Typed or printed name of signing Managing Member/Manager Scott Vesley, Member