2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000017993

Entity Name: 20TH BAYSHORE, LLC

FILED Nov 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

225 W. HUBBARD STREET, 4TH FLOOR 225 W. HUBBARD STREET, 4TH FLOOR

CHICAGO, IL 60610 CHICAGO, IL 60654

Current Mailing Address: New Mailing Address:

225 W. HUBBARD STREET, 4TH FLOOR 225 W. HUBBARD STREET, 4TH FLOOR

CHICAGO, IL 60610 CHICAGO, IL 60654

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC. CORPORATION SERVICE COMPANY 11380 PROSPERITY FARMS ROAD #221E 1201 HAYS STREET

PALM BEACH GARDENS, FL 33410 US TALLAHASSEE, FL 32301 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: TERESA FERRENTINO 11/10/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: SLAVEN, ARTHUR Name: SLAVEN, ARTHUR

Address: 225 W. HUBBARD STREET, 4TH FLOOR Address: 225 W. HUBBARD STREET, 4TH FLOOR

City-St-Zip: CHICAGO, IL 60610 City-St-Zip: CHICAGO, IL 60654

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 ASHKIN, LAURENCE
 Name:

 Address:
 225 W. HUBBARD STREET, 4TH FLOOR
 Address:

 City-St-Zip:
 CHICAGO, IL 60610
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: MCLINDEN, JOHN Name: MCLINDEN, JOHN

Address: 225 W. HUBBARD STREET, 4TH FLOOR Address: 225 W. HUBBARD STREET, 4TH FLOOR

City-St-Zip: CHICAGO, IL 60610 City-St-Zip: CHICAGO, IL 60654

Title: MGR () Delete Title: () Change () Addition

 Name:
 LERNER, MICHAEL
 Name:

 Address:
 1555 N. SHEFFIELD AVENUE
 Address:

 City-St-Zip:
 CHICAGO, IL 60622
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ARTHUR SLAVEN MGR 11/10/2009