

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000065722

FILED
Oct 03, 2007
Secretary of State

Entity Name: LINCOLN PALMS PROPERTIES, LLC

Current Principal Place of Business:

381 PARK AVENUE SOUTH, SUITE 1420
C/O MARGULES PROPERTIES, INC.
NEW YORK, NY 10016

New Principal Place of Business:

Current Mailing Address:

381 PARK AVENUE SOUTH, SUITE 1420
C/O MARGULES PROPERTIES, INC.
NEW YORK, NY 10016

New Mailing Address:

FEI Number: 75-3163329 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FX MANAGEMENT, INC.
407 LINCOLN RD SUITE #6G
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

FX MANAGEMENT, INC.
407 LINCOLN ROAD
SUITE 6G
MIAMI BEACH, FL 33139 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: MARC BENWARE

10/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MARGULES, ERIC
Address: 321 PARK AVENUE SOUTH SUITE 1420
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LINCOLN PALMS PROPER, TIES, LLC
Address: 321 PARK AVENUE SOUTH SUITE 1420
City-St-Zip: NEW YORK, NY 10016

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: ERIC MARGULES

MGRM

10/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date