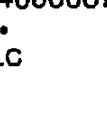


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LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	2006 OCT 24 A 4:41 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # L04000067506			
1. Limited Liability Company's Name JHM PINECREST LLC			
2. Principal Office Address 777 Brickell Avenue		3. Mailing Office Address 777 Brickell Avenue	
Suite, Apt. #, etc. Suite 1000		Suite, Apt. #, etc. Suite 1000	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33131	Country USA	Zip 33131	Country USA
		4. State/Country of Formation Florida	
		5. Date Organized or Qualified To Do Business in Florida 09/14/2004	
		6. FEI Number	☐ Applied For ☒ Not Applicable
		7. CERTIFICATE OF STATUS DESIRED ☐ \$5.00 Additional Fee for Certificate of Status	
8. Name and Address of Current Registered Agent			
Name Jay H. Massirman			
Street Address (P.O. Box Number is Not Acceptable) 777 Brickell Avenue			
Suite, Apt. #, Etc. Suite 1000			
City Miami		State FL	Zip Code 33131
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.			
Signature of Registered Agent		Date October 17, 2006	
REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
YES	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Massirman, Jay H.	777 Brickell Avenue # 1000	Miami, FL 33131
REINSTATEMENT 05-06			
TAL			
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 605, 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 605.405, 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 10/17/2006	Daytime Phone # 305-557-8889
Typed or printed name of signing Managing Member/Manager Jay H. Massirman			

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Division of Corporations

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Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

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LIMITED LIABILITY REINSTATEMENT

JHM PINECREST LLC

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