


FILED

2008 JAN 10 PM 4:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E041 (1/07)

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 2008 JAN 10 PM 4:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA																					
<b>DOCUMENT #</b> <span style="font-size: 1.2em;">L05000027530</span>																									
<b>1. Limited Liability Company's Name</b> <span style="font-size: 1.2em;">CG Miami Partners III, LLC</span>																									
<b>2. Principal Office Address - No P.O. Box #</b> <span style="font-size: 1.2em;">461 Fifth Avenue</span> <small>Suite, Apt. #, etc.</small> <span style="font-size: 1.2em;">20th floor</span> <small>City &amp; State</small> <span style="font-size: 1.2em;">New York NY 10017</span> <small>Zip</small> <span style="font-size: 1.2em;">10017</span> <small>Country</small> <span style="font-size: 1.2em;">USA</span>		<b>3. Mailing Office Address</b> <span style="font-size: 1.2em;">461 Fifth Avenue</span> <small>Suite, Apt. #, etc.</small> <span style="font-size: 1.2em;">20th floor</span> <small>City &amp; State</small> <span style="font-size: 1.2em;">New York NY</span> <small>Zip</small> <span style="font-size: 1.2em;">10017</span> <small>Country</small> <span style="font-size: 1.2em;">USA</span>		<b>4. State/Country of Formation</b>  <b>5. Date Organized or Qualified To Do Business in Florida</b>  <b>6. FEI Number</b> <span style="font-size: 1.2em;">L05000027530</span> <small>Applied For</small> <input checked="" type="checkbox"/> <small>Not Applicable</small>																					
<b>8. Name and Address of Current Registered Agent</b> <small>Name</small> <span style="font-size: 1.2em;">Corporation Service Company</span> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <span style="font-size: 1.2em;">1201 Hays Street</span> <small>Suite, Apt. #, Etc.</small>  <table border="1" style="width: 100%;"><tr><td><small>City</small> <span style="font-size: 1.2em;">Tallahassee</span></td><td><small>State</small> <span style="font-size: 1.2em;">FL</span></td><td><small>Zip Code</small> <span style="font-size: 1.2em;">32301</span></td></tr></table>				<small>City</small> <span style="font-size: 1.2em;">Tallahassee</span>	<small>State</small> <span style="font-size: 1.2em;">FL</span>	<small>Zip Code</small> <span style="font-size: 1.2em;">32301</span>	<b>7. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <small>\$5.00 Additional Fee required for a Certificate of Status</small>  <input type="checkbox"/> <b>A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.</b>																		
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<b>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.</b> <table border="1" style="width: 100%;"><tr><td><small>Signature of Registered Agent</small> <span style="font-size: 1.2em;">Cynthia L. Harris</span> <small>REGISTERED AGENT MUST SIGN</small></td><td><b>Cynthia L. Harris</b> <b>Asst. Vice President</b></td><td><small>Date</small> <span style="font-size: 1.2em;">1/10/08</span></td></tr></table>						<small>Signature of Registered Agent</small> <span style="font-size: 1.2em;">Cynthia L. Harris</span> <small>REGISTERED AGENT MUST SIGN</small>	<b>Cynthia L. Harris</b> <b>Asst. Vice President</b>	<small>Date</small> <span style="font-size: 1.2em;">1/10/08</span>																	
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<b>10. Names and Street Addresses of Managing Members/Managers</b> <table border="1" style="width: 100%;"><thead><tr><th>Titles</th><th>Name of Managing Members/Managers</th><th>Street Address of Each Managing Member/Manager</th><th>City / State / Zip</th></tr></thead><tbody><tr><td></td><td><span style="font-size: 1.2em;">Jon L. Halpern</span></td><td><span style="font-size: 1.2em;">461 Fifth Avenue 20th floor</span></td><td><span style="font-size: 1.2em;">New York NY 10017</span></td></tr><tr><td></td><td><span style="font-size: 1.2em;">Andrew Rabinowitz</span></td><td><span style="font-size: 1.2em;">461 Fifth Ave 20th floor</span></td><td><span style="font-size: 1.2em;">New York NY 10017</span></td></tr><tr><td colspan="3"></td><td><span style="font-size: 1.2em;">400114733904</span></td></tr><tr><td colspan="4" style="text-align: center;"><b>REINSTATEMENT</b> <span style="font-size: 1.5em;">2/07</span></td></tr></tbody></table>						Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip		<span style="font-size: 1.2em;">Jon L. Halpern</span>	<span style="font-size: 1.2em;">461 Fifth Avenue 20th floor</span>	<span style="font-size: 1.2em;">New York NY 10017</span>		<span style="font-size: 1.2em;">Andrew Rabinowitz</span>	<span style="font-size: 1.2em;">461 Fifth Ave 20th floor</span>	<span style="font-size: 1.2em;">New York NY 10017</span>				<span style="font-size: 1.2em;">400114733904</span>	<b>REINSTATEMENT</b> <span style="font-size: 1.5em;">2/07</span>			
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<b>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.</b> <table border="1" style="width: 100%;"><tr><td><small>Signature of Managing Member/Manager</small> <span style="font-size: 1.2em;">A. Farnant</span></td><td><small>Date</small> <span style="font-size: 1.2em;">1/9/08</span></td><td><small>Daytime Phone #</small> <span style="font-size: 1.2em;">212-381-4461</span></td></tr></table> <small>Typed or printed name of signing Managing Member/Manager</small>						<small>Signature of Managing Member/Manager</small> <span style="font-size: 1.2em;">A. Farnant</span>	<small>Date</small> <span style="font-size: 1.2em;">1/9/08</span>	<small>Daytime Phone #</small> <span style="font-size: 1.2em;">212-381-4461</span>																	
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 396030 7532308

AUTHORIZATION

COST LIMIT : \$ 238.75

ORDER DATE : January 10, 2008

ORDER TIME : 2:29 PM

ORDER NO. : 396030-010

CUSTOMER NO: 7532308

DOMESTIC FILINGS

NAME: CG MIAMI PARTNERS III, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Cindy Harris - Ext# 2937

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
08 JAN 10 PM 4:24  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA