

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000033041

**FILED**  
**Dec 05, 2008**  
**Secretary of State**

**Entity Name:** QUANTUM UNIT 3512 LLC

**Current Principal Place of Business:**

% RFR HOLDING, LLC  
3900 PARK AVE.  
NEW YORK, NY 10022

**New Principal Place of Business:**

% RFR HOLDING, LLC  
390 PARK AVE.  
NEW YORK, NY 10022

**Current Mailing Address:**

% RFR HOLDING, LLC  
3900 PARK AVE.  
NEW YORK, NY 10022

**New Mailing Address:**

% RFR HOLDING, LLC  
390 PARK AVE.  
NEW YORK, NY 10022

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

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

DADY, ROBERT E ESQ.  
201 ALHAMBRA CIR., SUITE 601  
CORAL GABLES, FL 33134    US

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

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: BOB DADY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:                      MGR                      ( ) Change (X) Addition  
Name:                      FUCHS, MICHAEL  
Address:                      390 PARK AVENUE  
City-St-Zip:                      NEW YORK, NY 10022

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: MICHAEL FUCHS

MGR

12/05/2008

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