

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L07000052518			
1. Entity Name COLLINS CORNER LLC			
Principal Place of Business % MARGULES PROPERTIES, INC. 381 PARK AVENUE SOUTH, SUITE 1420 NEW YORK, NY 10016		Mailing Address % MARGULES PROPERTIES, INC. 381 PARK AVENUE SOUTH, SUITE 1420 NEW YORK, NY 10016	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 26-095825		Applied For Not Applicable	
5. Certificate of Status Desired		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. Signature: <i>Sue G. Knight</i> Sue G. Knight as its agent DATE: 2-21-08 (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEB 13 \$238.75 After January 1, 2008, Fee will be \$377.50		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARGULES, ERIC 381 PARK AVENUE SOUTH, SUITE 1420 NEW YORK, NY 10016 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 600137122236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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REINSTATEMENT 2008			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>[Signature]</i>		10/20/08 212-684-7075, 17	
SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

FILED
08 OCT 21 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10152008 REIN-LLC CR2E101 (1/07)

600137122236

REINSTATEMENT

2008

BK



CORPORATION SERVICE COMPANY

L07000052518

ACCOUNT NO. : 072100000032

REFERENCE : 763865 4319480

AUTHORIZATION :

COST LIMIT : \$243.75

ORDER DATE : October 20, 2008

ORDER TIME : 8:49 AM

ORDER NO. : 763865-005

CUSTOMER NO: 4319480

DOMESTIC FILINGS

NAME: COLLINS CORNER LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext# 2956

EXAMINER'S INITIALS

[Handwritten Signature]

FILED
08 OCT 21 PM 2:45
TALLAHASSEE FLORIDA

RECEIVED
08 OCT 21 AM 10:48
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA