PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETINGTHIS FORM

LIMITED LIABILITY **COMPANY** REINSTATEMENT DOCUMENT # L13000026754 1. Limited Liability Company's Name 814 PROPERTY HOLDINGS LLC

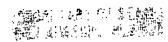


FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

野社 陰局

16 JAN 20 PM 2: 56



Principal Office Address - No P.O. Box# 2200 Biscayne Blvd		3. Mailing Office Ad	3. Mailing Office Address		CR2E041 (1/14)		
		2200 Biscayne Blvd		4. State/Country of Formation			
Suite, Apt. #, etc. Suite, A		Suite, Apt. #, etc.	ipt, #, etc.		Florida, USA		
					5. Date Organiz To Do Busine		
City& Sale Miami, Florida		Cily & State	_ '		6. FEI Number Applied For		
		Miami, Florida			10 0040044		Not Applicable
Zip	Country	Zip	Coi	untry			
33137	USA	33137	U	SA	CERTIFICATE OF S	STATUS DESIRED 55.00 Addition of the control of the	anal Fee required ate of status
	8. Name and Addr	ess of Current Registered	d Agent		_		
Nama					-		
Dayami Aguiar Sheel Address (P.O. Box Number is Not Acceptable) Suite.							
2200 Biscayne Blvd.							
Apt. #, E	ite.				-		
			1.5	T		'002812i7 20/160102802	[40]
^{City} Miami			State	Zip Code 33137	017	20/160102802	5 **516 .7
9. l, beir	ng appointed the figure ed agent of the	above named limited liabilit	y company, a	m familiar with and a	ccept the obligations	of Chapter 605, F.S.	
Signature	· (//a ·//	r					
Registered Agent ////////////////////////////////////			Date 01/19/2016				
	1 0 /-	REGISTERED AGENT MUS	I SUN				
10. Nante	s and Street Addresses of Authorized Re	presentatives/Managers					
Titles	Name of Authorized Representati Managers	ves/	Street Address of Each Authorized Representativ Manager			Oty / State / Zip	
Mgr	Russell W. Gall	but	2200 Biscayne Biv		livd	Miami, Florida	33137
Mgr	Dayami Aguia	ar .	22	00 Biscayne B	Blvd	Miami, Florida	33137
P, T	Russeli W. Gali	but	22	00 Biscayne B	livd	Miami, Florida	33137
	· · · · · · · · · · · · · · · · · · ·						

daguiar@crescentheights.com 11. E-mail Address:

Dayami Aguiar

(To be used for future annual report notifications)

2200 Biscayne Blvd

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 805, F.S. I further certify that when filling this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirement of section 505 0012, 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 pain 1 am aware they also information submitted in a document to the Department of State constitutes a third degree felony as provided for in a. 817.155, F.S.

Signature of authorized representative/member

VP, S

01/19/2016 Dayami Agular, Manager Typed or printed name of signing authorized representative/member

305-374-5700x7250 . Davtime Phone #

Miami, Florida 33137

la 1/21/11