

L98000001498

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING 2002 OCT 31 PM 1:37

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L98000001498 1. Limited Liability Company's Name TAX CREDIT SENIOR PROPERTIES, L.L.C.			
2. Principal Office Address 1333 Lapaz Street Suite, Apt. #, etc.		3. Mailing Office Address 196 Technology Drive Suite, Apt. #, etc. Suite D	
City & State Pensacola, FL		City & State Irvine, CA	
Zip 32501	Country US	Zip 92618	Country US
4. State/Country of Formation FL		5. Date Organized or Qualified To Do Business in Florida 8/18/98	
6. FEI Number 593549222		Applied for <input type="checkbox"/> Not Applicable	
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee Required for Certificate of Status			

B. Name and Address of Current Registered Agent

Name Corporation Service Company		000008735880
Street Address (P.O. Box Number is Not Acceptable) 120 Hays Street		
Suite, Apt. #, etc.		
City Tallahassee		State FL
		Zip Code 32301

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.

Signature of Registered Agent: *Brian Courtney* Date: 10-31-02
 REGISTERED AGENT **Asst. V. Pres.**

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Richard E. Tourtelot	196 Technology Drive	Irvine, CA 92618
MGRM	Cliff Z. Singleton	501 Hollywood Boulevard	West Melbourne, FL 32904

REINSTATEMENT 2002

11. I certify that I am managing member/manager of 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.

Signature of Managing Member/Manager: *Richard E. Tourtelot* Date: 10/31/02 Daytime Phone: 949-450-1113
 Typed or printed name of signing Managing Member/Manager: **Richard E. Tourtelot, Managing Member**

CORP-11901



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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 803441 1299A

AUTHORIZATION : *Patricia Pijute*
COST LIMIT : \$ ~~750.00~~
150.00

ORDER DATE : October 31, 2002
ORDER TIME : 3:13 PM
ORDER NO. : 803441-005
CUSTOMER NO: 1299A

CUSTOMER: Ms. Lisa Watson
Clark Partington Hart Larry
Post Office Box 13010
Pensacola, FL 32591

RECEIVED
02 OCT 31 PM 3:53
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: TAX CREDIT SENIOR PROPERTIES,
L.L.C.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore
EXAMINER'S INITIALS _____