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CT CORP
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**2005 LIMITED LIABILITY COMPANY
REINSTATEMENT**

FILED
Oct 24, 2005 8:00 A.M.
Secretary of State

DOCUMENT # L99000004515			
1. Entity Name PRG-HIDDEN VILLAGE, L.L.C.			
Principal Place of Business 2701 EAST LUZERNE STREET PHILADELPHIA, PA 19137		Mailing Address 2701 EAST LUZERNE STREET PHILADELPHIA, PA 19137	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 58-3891250		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		83.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ANSBACHER, LEWIS 5150 BELFORT ROAD BLDG 100 JACKSONVILLE, FL 32256		7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road City Plantation FL 33324	
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  JAMES M. NEWSOME Special Assistant Secretary Date 10/24/05			
FILE NUMBER FEE IS \$180.00 After January 1, 2006, Fee will be \$200.00		Fees of \$100.00 payable to State of Florida Department of Banking	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOODMAN, JON J 2701 E. LUZERNE STREET PHILADELPHIA, PA 19137 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERGER, STEVEN A 2701 E. LUZERNE STREET PHILADELPHIA, PA 19137 ☐ 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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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 888, Florida Statutes.			
SIGNATURE: /s/ Jon J. Goodman, Managing Member		10/24/2005 (215) 744-1200	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE		Date	

M. HODGES

REINSTATEMENT 2005

Florida Department of State
Division of Corporations
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LIMITED LIABILITY REINSTATEMENT

PRG-HIDDEN VILLAGE, L.L.C.

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