PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

M00000000619

FILED

02 JUN 20 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M00000000619

1. Limited Liability Company's Name

Pyramid GP LLC

2. Principal Office Address		Mailing Address	
c/o Goodman Properties, Inc.		c/o Goodman Properties, Inc.	
777 S. Flagler Drive		777 S. Flagler Drive	
Suite 1101E		Suite 1101E	
City & State: West Palm Beach, FL		City & State: West Palm Beach, FL	
Zip: 33401	Country: USA	Zip: 33401	Country: USA

4. State/Country of Formation: Delaware

5. Date Organized or Qualified To Do Business in Florida: 3/30/00

6. FEI Number: [ ] Applied For [X] Not Applicable

7. CERTIFICATE OF STATUS DESIRED [X] $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

400005914344--2
-06/24/02--01012--010
****155.00 ****155.00

Name: William A. Shewalter

Street Address (P.O. Box Number is Not Acceptable): c/o Goodman Properties, Inc., 777S. Flagler Drive

400005914344--2
-06/24/02--01012--011
*****55.00 *****55.00

Suite, Apt. #, Etc.: Suite 1101E

City: West Palm Beach, FL 33401 | State: FL | Zip Code: 33401

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: Wm A Shewalter V.P. Date: 6/1/02

REGISTERED AGENT MUST SIGN

CR2E041 (9/00)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
M	FCC Partners LP, Ltd.	c/o Goodman Properties, Inc. 777 S. Flagler Drive, Suite 1101E	West Palm Beach, FL 33401
MGR	Goodman Properties, Inc.	777 S. Flagler Drive, Suite 1101E	West Palm Beach, FL 33401
	REINSTATEMENT 2001-02		LLC55 155.00 -Adm

11. I certify that I am managing member/manager or 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: Wm A Shewalter V.P. Goodman Properties, Inc., manager Date: 6/1/02 Daytime Phone #: 561-833-3777

Typed or printed name of signing Managing Member/Manager: William A. Shewalter, Vice President