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LEASE READ ALL INSTRUCTIONS BEFORE COMPLETE

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DIVIN-AN

FLOR A DE TIME TOFS YER



DIVISION OF CORPORATIONS

DOCUMENT # M01000001655

1. Limited Liability Company's Name

S.E. Residential Palms LLC

03 JAN 23 PM 2: 18

SECRETARY OF STATE
TALEAHASSEE, FLORIDA

2. Principal	l Office Address	3. Mailing Office A	ddress			
•	hird Avenue	950 Third A		4. State/C	ountry of Formation	7
Sulte, Apt. #		Suite, Apt. #, etc.			DE	
18th	n Floor	18th Floor	:		rganized or Qualified Business In Florida	
City & State		City & State			7/24/200	
New Y	ork, NY	New York, N	1X	6. FEI Nu		Applied For
Zip	Country	Zip	Country	7.		Not Applicable
10022	USA	10022	USA	CERTIFIC		Additional Fee required a Certificate of Status
		8. Name :	and Address of Cu	rrent Registered Agent		
	Name					
	Corporation Servi	 _				.
	Street Address (P.O. Box Number 1201 Hays Street	is not Acceptable)				
	Suite, Apt. #, Etc.			·		
						
	City Tallahassee				State Zip Code FL 32301-252	_
	nes and Street Addresses of Managing Name of	Members/Managers	Street	Address of Each	014-104-	
Titles	Name of Managing Members/M	anagers		Address of Each Member/Manager	City / Sta	te / Zip
MGRM	The Praedium Perform	ance Fund IV	L.P 950 7	hird Ave, 18th H	Flr New York, NY 100	22
				<u></u> [**]	00106717	
· · · · · · · ·			in the second se	EINSTAT	EMENT 200	<i>12-20</i> 03
				125-4	TUBLUM TO	
filing all fe as if	tify that I am managing member/man this reinstatement application the rea es owed by the limited liability compai made under oath.	son for dissolution has been ny have been paid. The info	n eliminated, the lim ermation Indicated o	ited liability company name s n this application is true and	atisfies the requirements of section accurate, and my signature shall ha	n 608.406, F.S., and that ave the same legal effect
Signature Managing	of g Member/Manager	hot_		Date' T v3	Daytime Phone# 212-22	4-5600
Typed or i	printed name of signing Managing M	mher/Manager A. Hoy	d Lattin . Vice	President of ben	eval Partner of Mana	ang Hember



ON SERVICE COMPANY"
ACCOUNT NO. : 072100000032
REFERENCE : 903165 5155201
AUTHORIZATION : Patricia Pient
COST LIMIT : -\$ 905.00 205.00
ORDER DATE : January 22, 2003
ORDER TIME : 10:43 AM
ORDER NO. : 903165-005
CUSTOMER NO: 5155201
CUSTOMER: Ms. Cynthia E. Kingston The Praedium Group 950 Third Avenue 18th Floor New York, NY 10022
REINSTATEMENT OF CO.
New York, NY 10022 REINSTATEMENT CORPORATION NAME: S.E. RESIDENTIAL PALMS LLC 153

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea
EXAMINER'S INITIALS