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LIMITED LIABILITY REINSTATEMENT
FP2-3 LLC

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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

CR2E041 (1/11)

DOCUMENT # M02000003265

1. Limited Liability Company's Name
FP2-3 LLC

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
c/o FIG LLC	
Suite, Apt. #, etc. 1345 Avenue of the Americas,	Suite, Apt. #, etc.
City & State New York, NY	City & State
Zip: 10105 / Country	Zip / Country

4. State/Country of Formation: Delaware
5. Date Organized or Qualified To Do Business in Florida: 12/9/2002
6. FEI Number: 37-1428465 ☐ Applied For ☐ Not Applicable
7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: C T CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD
Suite, Apt. #, Etc.
City: PLANTATION | State: FL | Zip Code: 33324

E-mail Address:
DBCTProcess@fortress.com
(To be used for future annual report notices)

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: Connie Bryan Assistant Secretary
REGISTERED AGENT SIGNATURE
Date: July 5, 2012

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
MBR	FP2 L.L.C	c/o FIG LLC, One Market Plaza, Spear Tower, 42nd Floor	New York, NY 10105
Director	Constantine M. Dakolias	c/o FIG LLC, 1345 Avenue of the Americas	New York, NY 10105
Director	Marc K. Furstein	c/o FIG LLC, One Market Plaza, Spear Tower, 42nd Floor	San Francisco, CA 94105
Director	Glenn P. Cummins	c/o FIG LLC, 1345 Avenue of the Americas	New York, NY 10105

REINSTATEMENT
03-12 DB

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 608.405, 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing Member/Manager: [signature] Date: 6/26/12 Daytime Phone #: (415) 284-7400

Typed or printed name of signing Managing Member/Manager: Marc K. Furstein, Chief Operating Officer

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