

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M03000000079

Entity Name: ARDEN TOSCANA, LLC

FILED
Oct 29, 2004
Secretary of State

Current Principal Place of Business:

180 ARAGON AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

180 ARAGON AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

1635 MARKET STREET
SEVEN PENN CENTER - 17TH FLOOR
PHILADELPHIA, PA 19103

FEI Number: 14-1858919 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STEARNS WEAVER MILLER WEISSLER ALHADEFF &
150 WEST FLAGLER STREET STE. 2200
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ARCOL MANAGEMENT LLC,
Address: 121 S. BROAD STREET 13TH FL
City-St-Zip: PHILADELPHIA, PA 19107

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ARCOL MANAGEMENT LLC,
Address: 1635 MARKET STREET, 17TH FLOOR
City-St-Zip: PHILADELPHIA, PA 19103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 608, Florida Statutes.

SIGNATURE: CRAIG A. SPENCER

MGR

10/29/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date