` 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT								
DOCUMENT # M0300000906 1. Entity Name MS WHISPERING PALMS, L.L.C.					OS MAY I	LEL)	
				S H I	1 Arsecon 16	PM.		
Principal Place of Business 1585 BROADWAY, 37TH FLOOR C/O MORGAN STANLEY REAL ESTATE FUNDS NEW YORK, NY 10036		Mailing Address 1585 BROADWAY, 37TH FLOOR C/O MORGAN STANLEY REAL ESTATE FUNDS NEW YORK, NY 10036			OSMAY 16 PM 1:58 TAKLAHASSEE, FINATE			
3 Principal Place of Business 3464 Peach+ree RD		3 Mailing Address 3424 PCACHTEE Rd						
Suite, Apt. #, etc. Sulke 800 NE		Suite, Apt. #, etc. Syste 800 AHN! Koren Saddler-Conrad			05022005 REIN-LLC	CR2E1	01 (6/04)	
ACITY & State ATTEMATELLE GA		City & State ALONA, GA		4. FEI Number 20-/796311		—	Applicable	
3032	Country A	30326	Country		5. Certificate of Status Desired		5.00 Addi ee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)				
	ON, FL 33324							
				City		FL	Zip Code	
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. MARY R. ADAMS SIGNATURE Signature, typical or printedurine of registered agent and title if applicable. (NOTE/ASSAIRS LAMA Manufacturing) DATE								
FILE NOWIII FEE IS \$200.00								
9.	MANAGING MEMBE	RS/MANAGERS	10.		ADDITIONS	/CHANGES		
TITLE Name	MGRM MORGAN STANLEY REAL ESTA	Delete	TITU NAM	l l			☐ Change	☐ Addition
STREET ADDRESS	1585 BROADWAY, 37TH FLOOR STR			ET ADDRESS -ST-ZIP	1000549 05/20/0501038-	143: -004	5 1 **200.0	::)
TITLE	NEW YORK, NY 10036 MGRM	Delete	mu	·			Change	☐ Addition
NAME	MORGAN STANLEY REAL ESTA	TE INVESTORS IV	NAM	- I				_
STREET ADDRESS CITY-ST-ZIP	1585 BROADWAY, 37TH FLOOR NEW YORK, NY 10036	t		ET ADDRESS -ST-ZIP				
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CITY-ST-ZIP	NEW YORK, NY 10036 MGRM	Delete	TITL	- ST- ZIP			☐ Change	Addition
NAME	MSP REAL ESTATE FUND IV, L.	P. '	NAM	iE i	\mathcal{N}			
STREET ADDRESS CITY-ST-ZIP	1585 BROADWAY, 37TH FLOOR NEW YORK, NY 10036	L		ET ADDRESS -ST-ZIP	V	•		
TITLE NAME	,	☐ Delete	TITL				Change	☐ Addition
STREET ADORESS CITY-ST-ZIP			STR	EET ADDRESS '-ST-ZIP				
TITLE		☐ Delete	TITT.				☐ Change	☐ Addition
NAME STREET ADDRESS			NAM STRI	EET ADDRESS				
CITY-ST-ZIP	<u></u>		CITY	'-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 cath; 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: Christopher L. O'Dell Vice President Secretary May 2, 2005 (212) 762–7829								
SIGNATURE: OHI ISCOPILET L. U DELL VICE PRESIDENT SECRETARY MAY 2. 2005 (212) 702-7829 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Deptime Prove #								