~~· I 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # M03000002249

AUBÚRNDALE LP, LLC



Principal Place of Business

50 W. SAN FERNANDO STREET SAN JOSE, CA 95113

Mailing Address

50 W. SAN FERNANDO STREET SAN JOSE, CA 95113

FILED

06 SEP 29 AM 8: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

700080313497



09142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 77-0605851

Applied For Not Applicable

5. Certificate of Status Desired

Christopher Jaap, Assistant Secretary 9/11/2006 (408)995-5115

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

SIGNATURE	Lana R. Das	aura R. Dunlap as its agent Apont signature required when remistating) DATE	06
	ing Fee is \$50.00 by September 15, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUBURNDALE HOLDINGS, LLC 50 W. SAN FERNANDO STREET SAN JOSE, CA 95113		
TITLE NAME STREET ADDRESS CITY-S1-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REMISTATI	MENT 2006	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
indicated	certify that the information supplied with this filing does not qualify for the ex- on this report is true and accurate and that my signature shall have the san bility company or the receiver or trustee empowered to execute this report a	e legal effect as if made under gath; that I am a managing member or m	ie information anager of the

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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

Laura R. Dunlap

ACCOUNT :	NO.
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072100000032

REFERENCE :

490058

4379392

AUTHORIZATION

ORDER DATE :

September 28, 2006

ORDER TIME: 10:49 PM

ORDER NO. : 490058-070

CUSTOMER NO:

4379392

REINSTATEMENT

NAME: AUBURNDALE LP, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS