

PLEASE READ ALL INSTRUCTIONS BEFORE FILING

M04000005532

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M04000005532

1. Limited Liability Company's Name

Prospect Aragon Holdings LLC

2. Principal Office Address - No P.O. Box #

100 Clearbrook Road

Suite, Apt. #, etc.

2nd Floor

City & State

Elmsford, New York

Zip

10523

Country

USA

3. Mailing Office Address

100 Clearbrook Road

Suite, Apt. #, etc.

2nd Floor

City & State

Elmsford, New York

Zip

10523

Country

USA

8. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

4. State/Country of Formation

Delaware

5. Date Organized or Qualified
To Do Business in Florida

12/16/2004

6. FEI Number

20-2003770

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

☒ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

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

Cynthia L. Harris

Cynthia L. Harris

Asst. Vice President

Date 6/19/07

REGISTERED AGENT MUST SIGN

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 |
|--------|--------------------------------------|---|--------------------|
| MGR | Prospect Aragon Manager LLC | 100 Clearbrook Road 2nd Floor | Elmsford, NY 10523 |
| | | | |
| | | | |
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REINSTATEMENT 2005-2007

0000104647900

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 608.406, 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.

Signature of
Managing Member/Manager

RJ Shea

Date 06/15/2007 Daytime Phone# (914) 345-3071

Typed or printed name of signing Managing Member/Manager

By: Prospect Aragon Manager LLC, its manager

By: Prospect Aragon Parent LLC, its manager

By: Lance B. Lundberg, its managing member

By: Richard J. Shea, Jr., His Attorney-In-Fact

FILED
07 JUN 21 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

CR2E041 (1/07)



CORPORATION SERVICE COMPANY

M04000005532

ACCOUNT NO. : 072100000032

REFERENCE : 955672 7287682

AUTHORIZATION

COST LIMIT

\$ 150.00

ORDER DATE : June 19, 2007

155.00

ORDER TIME : 5:01 PM

ORDER NO. : 955672-005

CUSTOMER NO: 7287682

BK

FILED
07 JUN 21 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

NAME: PROSPECT ARAGON HOLDINGS LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

BK

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris

EXAMINER'S INITIALS

RECEIVED
07 JUN 21 AM 8:45
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA