2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED **DOCUMENT # M04000005534** 06 OCT 16 PM 2: 54 1. Entity Name BH/IGF HIDDEN HARBOUR APARTMENTS LLC SEURE TAXY OF STATE TALLAHASSEE, FLORIDA Ŋδ Principal Place of Business Mailing Address 50 CALIFORNIA STREET 50 CALIFORNIA STREET 100080867291 SUITE 200 SUITE 200 SAN FRANCISCO, CA 94111 SAN FRANCISCO, CA 94111 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10062006 REIN-LLC CR2E101 (11/05) City & State 4. FEI Number Applied For City & State 20-1996013 Not Applicable Country Zio Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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. Sara Lea as its agent 10-16-2004 and title il applicable. (NOTE: Regis Make check payable to FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$200.00 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME HIDDEN HARBOUR INVESTOR LLC NAME STREET ADDRESS 50 CALIFORNIA ST., SUITE 200 STREET ADDRESS CITY-ST-ZIP SAN FRANCISCO, CA 94111 CITY-ST-ZIP MGRM TITLE Delete TITLE ☐ Change ☐ Addition BLACKROCK REALTY ADVISORS, INC. NAME NAME STREET ADDRESS 50 CALIFORNIA ST., SUITE 200 STREET ADDRESS SAN FRANCISCO, CA 94111 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESSA STREET ADDRESS CITY-ST-7IP ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP □ Delete ☐ Addition TITLE TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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:

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

MU4 U00005534

Signature Page to 2006 Limited Liability Company Reinstatement

for

BH/IGF HIDDEN HARBOUR APARTMENTS LLC

)-

BH/IGF Hidden Harbour Apartments LLC, a Delaware limited liability company

By: Hidden Harbour Investor LLC, a Delaware limited liability company, its Managing Member

By: IGF Hidden Harbour LLC, a Delaware limited liability company, its Member

> By: BlackRock Diamond Property Fund, L.P., a Delaware limited Partnership, its Sole Member

By: BlackRock Diamond Property Fund, LLC, a Delaware limited liability company, its General Partner

By: BlackRock Diamond Property Fund, Inc., a Maryland corporation, its Member

Herman Howerton,

Secretary

	ACCOUNT NO.	:	0721000000	32		
	REFERENCE		525586			
	AUTHORIZATION	:		,		,
	COST LIMIT	:	\$ (700.00	man =) :o	
	October 13, 2006		150.00		001	
ORDER TIME :	10:12 AM				<u> </u>	P
ORDER NO. :	525586-010				Po	2:54
CUSTOMER NO:	7171451		1)/	/	ORIOA	7.0
7	REINSTATEME	<u>NT</u>	1-91			06 (
NAME:	BH/IGF HIDDEN APARTMENTS LL		RBOUR		- -	06 OCT 1'S EH 10: 48
XX REINSTA	TEMENT				104	9
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FILE	NG:		
CERTIFIED COPY XX PLAIN STAMPED COPY						

EXAMINER'S INITIALS

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea