

M0500004642

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LIMITED LIABILITY REINSTATEMENT

ABBEE OWNERS LLC

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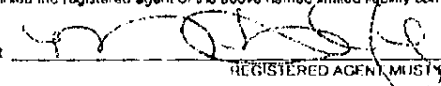
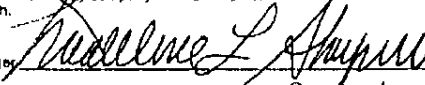
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LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M05000004642 1. Limited Liability Company's Name ABBAY OWNERS LLC			
2. Principal Office Address - No P.O. Box # 1271 Sixth Avenue Suite, Apt. #, etc.		3. Mailing Office Address 1271 Sixth Avenue Suite, Apt. #, etc.	
City & State New York, NY Zip 10020		City & State New York, NY Zip 10020	
Country New York		Country New York	
4. State/Country of Formation Delaware			
5. Date Organized or Qualified To Do Business in Florida 08/22/2005			
6. FEI Number ☐ Applied For ☐ Not Applicable ☐			
7. CERTIFICATE OF STATUS DESIRED ☐			
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			
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  Matthew Young as its agent Date 11-2-09 REGISTERED AGENT MUST SIGN			
10. Names and Street Addresses of Managing Members/Managers			
Titles	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MC/DA	SETAI MEZZANINE LLC	1271 Sixth Avenue	New York, NY 10020
REINSTATEMENT			
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  Date 11/2/09 Daytime Phone #			
Typed or printed name of signing Managing Member/Manager Madeline L. Shapiro			

CR2E041 (12/07)