

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # M06000005615

1. Entity Name  
SCP 2006-C23-528 LLC



FILED

07 NOV -6 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



10182007 REIN-LLC CR2E101 (1/07)

4. FEI Number 94-0290425 Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

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

## 7. Name and Address of New Registered Agent

Name

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

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.

SIGNATURE

*Karl A. Burt*  
(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

10/29/07  
DATE

FILE NOW!!! FEE IS \$50.00  
After January 1, 2008, Fee will be \$100.00

In accordance with s. 607.193(2)(b), F.S., the limited  
liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

## 9. MANAGING MEMBERS / MANAGERS

TITLE MGR ☒ Delete  
NAME LANDES, BRETT L  
STREET ADDRESS 2525 FAIRMOUNT STREET SUITE 200  
CITY-ST-ZIP DALLAS, TX 75201

TITLE MGR ☒ Delete  
NAME LOVASZ, GREG  
STREET ADDRESS 2525 FAIRMOUNT STREET SUITE 200  
CITY-ST-ZIP DALLAS, TX 75201

TITLE MGR ☒ Delete  
NAME MIMS, JEFFREY H  
STREET ADDRESS 3102 OAK LAWN AVE. SUITE 700  
CITY-ST-ZIP DALLAS, TX 75219

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS / CHANGES

TITLE MGR ☐ Change ☒ Addition  
NAME Wolf, Douglas  
STREET ADDRESS 220 Jackson St, 2nd Floor  
CITY-ST-ZIP San Francisco, CA 94111

TITLE MGR ☐ Change ☒ Addition  
NAME Swanson, Charles S.  
STREET ADDRESS 220 Jackson St, 2nd Floor  
CITY-ST-ZIP San Francisco, CA 94111

TITLE MGR ☐ Change ☒ Addition  
NAME Teig, Howard  
STREET ADDRESS 600 Lexington Ave, 33rd Floor  
CITY-ST-ZIP New York, NY 10022

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

REINSTATEMENT

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:

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

Howard Teig, Mgr.

10/19/2007

(212) 750-0149

Date

Daytime Phone #