


M07000004575

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 NOV 21 PM 3:31

LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M07000004575

1. Limited Liability Company's Name
G&I V RESEARCH PARK LLC

2011

2. Principal Office Address - No P.O. Box # C/O DRA ADVISORS LLC		3. Mailing Office Address C/O DRA ADVISORS LLC	
Suite, Apt. #, etc. 220 E. 42ND ST. 27TH FL.		Suite, Apt. #, etc. 220 E. 42ND ST. 27TH FL.	
City & State NEW YORK, NY		City & State NEW YORK, NY	
Zip 10017	Country USA	Zip 10017	Country USA

600214509316

CR2E041 (1/11)

4. State/Country of Formation DELAWARE	
5. Date Organized or Qualified To Do Business in Florida 07/31/2007	
6. FEI Number 26-0516712	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <small>\$5.00 Additional Fee for Certificate of Status</small>	

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

E-mail Address:
vfranklin@draadvisors.com
(To be used for future annual report notices)

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 *Michele Henry* **Michele Henry** Assistant VP Date November 21, 2011

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
MGRM	G&I V INVESTMENT RESEARCH	220 E. 42ND ST. 27TH FL.	NEW YORK, NY 10017
	PARK LLC		

REINSTATEMENT 2011

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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Managing Member/Manager *[Signature]* Date 11/18/11 Daytime Phone # _____

Typed or printed name of signing Managing Member/Manager _____



CORPORATION SERVICE COMPANY

M07000004575

ACCOUNT NO. : I20000000195

REFERENCE : 987346 4391782

AUTHORIZATION :

COST LIMIT :

\$ 638.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 21 PM 3:31

ORDER DATE : November 21, 2011

ORDER TIME : 1:09 PM

ORDER NO. : 987346-025

CUSTOMER NO: 4391782

238.75

REINSTATEMENT

NAME: G&I V RESEARCH PARK LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS

BK

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2011 NOV 21 PM 1:51
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING