PLEASE READ ALL INSTRUMIONS BLEDNES CONPL. TO THIS FORM. FLORIDA DEPARTMENT OF STATE TOTAL STA

LIMITED LIABILITY								
COMPANY								
REINSTATEMENT								



DOCUMENT # M0700004576 1. Limited Liability Company's Name										Pr. 33 3	
G&I V INVESTMENT RESEARCH PARK LLC						ى 400214509254					
				2	l Jo.		46	1021°	+5U3Z3	> ^	
				Office Address A ADVISORS LLC				CR2E041 (1/11) 4. State/Country of Formation			
Suite, Apt.	 	Suite, Apt. #, etc. 220 E. 42ND ST. 27TH FL.				DELAWARE 5. Date Organized or Qualified					
City & State		City & State NEW YORK, NY				To Do Business in Florida 07/31/2007 6. FEI Number Applied For					
Zip 10017	Country	Zip 10017			untry		26-05 7. CERTIFICAT	16609 TE OF STATUS D	DESIRED TO SS 007A	Not Applicable	
8.	Name and Address of	- 10 a	red Agent							Cerment of States A	
Name CORPORATION SERVICE COMPANY							E-mail Address:				
	ress (P.O. Box Number is Not Acceptable IAYS STREET #. Etc.))			1						
						vfranklin@draadvisors.com					
TALLAHASSEE State Zip Code FL 32301						(To be used for future annual report notices)					
Signatu	red Agent	REGISTERED AC	nnj	.~		ele Hen tant VP	eccept the obliga	ations of Chapt	er608, F.S. Vevende	u 2/2011	
10. Name	es and Street Addresses of Managing Me		***************	3,614	 	· · · · · · · · · · · · · · · · · · ·					
Titles	Name of Managing Members/ Manag	1813		Street Address of Each Managing Member/Manag				r City / State / Zip			
MGRM	IGRM G&I FUND V REAL ESTATE INV.			220 E. 42ND ST. 27TH I				L. NEW YORK, NY 10017			
	TRUST		· · · · · · · · · · · · · · · · · · ·								
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		handara mahamata a shiikis da ka sa ka Misadiiki			······································				a superior with the		
Sue Valendari		are server and the	- 1 of Office	\$1.42 (F. 11)	Control of the control	o company			Control of the contro		
fling t all fee as if n Signatu Membe	y that I am managing member/manager of his reinstatement application the reason for sowed by the limited flability company hande under cath. I am aware that false influte of Managing r/Manager	or the receiver or or dissolution has been paid. The opposition submitte	trustee emp s been elimi se informatio	owered nated, the	to execut ve limited tea on thi	e this application Eability comp s application	is true and according constitutes a	fies the require trate, and my s	ements of section 608 signature shall have t slony as provided for	8.406, F.S., and that the same legal effect	
INDEG OF DE	inted name of signing Managing Member	(мелада:									

REFERENCE :

AUTHORIZATION

COST LIMIT :

ORDER DATE: November 21, 2011

ORDER TIME : 1:07 PM

ORDER NO. : 987346-015

CUSTOMER NO: 4391782

REINSTATEMENT

NAME:

G&I V INVESTMENT RESEARCH

PARK LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS