

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M10000000078

**Entity Name:** LCP SLJV 2009-1 FL-2, L.L.C.

**FILED**  
**Jan 09, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

399 PARK AVENUE, 18TH FLOOR  
C/O STRATEGIC LOAN JOINT VENTURE 2008-1  
NEW YORK, NY 10022 US

**New Principal Place of Business:**

**Current Mailing Address:**

399 PARK AVENUE, 18TH FLOOR  
C/O STRATEGIC LOAN JOINT VENTURE 2008-1  
NEW YORK, NY 10022 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:** BARBARA CHRISTMAN, ASSISTANT SECRETARY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LCP STRATEGIC LOAN JOINT VENTURE 2008-1LLC  
**Address:** 399 PARK AVENUE, 18TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10022

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** LCP STRATEGIC LOAN JOINT VENTURE 2008-1LLC                      MGR                      01/09/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date