

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

2002 LLC
APPLICATION
FOR
REINSTATEMENT
LLC



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV 13 PM 2:00

1. DOCUMENT # M99000000206

Name and Mailing Address

0000836 01 FP 0.352 **PRSRT T3 0 0615 32809-780823



CNB ORLANDO HOTEL LLC
2323 MCCOY ROAD
ORLANDO FL 32809-7808



CR2E084 (8/02)

2. New Mailing Address 3010 WESTCHESTER AVE., SUITE #106 City, State, Zip PURCHASE, NY 10577		4. State/Country of Formation NY	
5. Date Organized or Qualified To Do Business in Florida 02/09/1999		6. FEI Number 13-4038460	
Principal Place of Business 2323 MCCOY ROAD ORLANDO FL 32812		3. New Principal Place of Business Address City, State, Zip	
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		Applied For Not Applicable	
\$5.00 Additional Fee required for a Certificate of Status			

8. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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10. 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 _____ Date 11/13/02
REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	CASPI ORLANDO REALTY, LLC	2323 MCCOY ROAD	ORLANDO FL 32809-7808
MGRM	BURSTYN ORLANDO LLC	2323 MCCOY ROAD	ORLANDO FL 32809-7808
MGRM	NAJJAR ORLANDO, LLC	2323 MCCOY ROAD	ORLANDO FL 32809-7808

700009027867
11/15/02--01082--003 **50.00

12. 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 _____
Typed or printed name of signing Managing Member/Manager
CNB ORLANDO HOTEL LLC
BY CASPI ORLANDO REALTY LLC AS MANAGER
BY STEVEN J. CASPI, MANAGER

2 of 2

CNB ORLANDO HOTEL LLC
3010 Westchester Avenue, Suite #106
Purchase, New York 10577

November 1, 2002

Brenda Tadlock
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

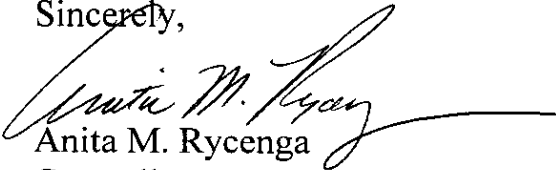
Dear Brenda,

Per our conversation today, the notice was sent to the wrong address. Please accept this \$50 check for the UBR filing for "CNB Orlando Hotel LLC" and also correct the mailing address so it will be sent to the proper address in the future. It is as follows:

CNB Orlando Hotel LLC
3010 Westchester Ave., Ste#106
Purchase, NY 10577

Thank you kindly for your assistance with this matter. I may be reached at 914-694-8300 should you have any further issues.

Sincerely,


Anita M. Rycenga
Controller