


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M99000001149

1. Limited Liability Company's Name

Grove Ocean LLC

**REINSTATEMENT** 2000-2001

2. Principal Office Address  
2700 Tigertail Avenue

Suite, Apt. #, etc.

City & State  
Coconut Grove, Florida

Zip Country  
33133 USA

Mailing Office Address  
c/o McCann, Inc.  
1271 Avenue of the Americas

Suite, Apt. #, etc.  
40th Floor

City & State  
New York, New York

Zip Country  
10020 USA

4. State/Country of Formation  
Delaware

5. Date Organized or Qualified To Do Business in Florida  
7/19/99

6. FEI Number  
13-4069782

Applied For  
Not Applicable

7. CERTIFICATE OF STATUS DESIRED  \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name  
Darlene Serrano

Street Address (P.O. Box Number is Not Acceptable)  
2700 Tigertail Avenue

Suite, Apt. #, Etc.

City  
Coconut Grove

State  
FL

Zip Code  
33133

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-03/08/01--01013--003  
\*\*\*1640.00 \*\*\*\*205.00

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: Darlene Serrano REGISTERED AGENT MUST SIGN

Date: February 13, 2001

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
MAN. MEM.	Grove Investments Series I LLC-- Bruce Fahey, MGRM	Bruce Fahey, Managing Member c/o McCann, Inc. 1271 Avenue of the Americas 40th Floor	New York, New York 10020

UB  
3-5-01

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.

Signature of Managing Member/Manager: Bruce Fahey Date: 2/13/01 Daytime Phone #: 212-586-8000

Typed or printed name of signing Managing Member/Manager: BRUCE FAHEY, member, Grove Investments Series I LLC

CR2E041 (9/00)