PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 FEB -6 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000038913

1. Corporation Name

Sandy Pines JV, Inc.
3326 Mary Street Ste 603
Miami, Florida 33133

02/02/04 01095 023 $150.00

2. Principal Office Address	3. Mailing Office Address
3326 Mary St.	3326 Mary St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Ste: 603	Ste: 603
City & State	City & State
Miami, FL	Miami, FL
Zip / Country	Zip / Country
33133	33133

4. Date Incorporated or Qualified To Do Business in Florida: 4/18/2000

5. FEI Number: 65-1099583 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: World Corporate Services, Inc.

300029209009
02/24/04--01029--00 **150.00

Street Address (P.O. Box Number is Not Acceptable): 2665 South Bayshore Drive

Suite, Apt. #, Etc.: Suite 703

City: Miami | State: FL | Zip Code: 33133

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Timothy Richards Date: _____
REGISTERED AGENT MUST SIGN

CR2E061 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PT	Randy Herscovici	3326 Mary Street Ste 603	Miami, FL 33133
VPSD	Eduardo Naranjo	5009 S.W. 71st Place	Miami, Fl 33155

REINSTATEMENT 03-04

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: Randy Herscovici
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #