		PLEASE READ A	ALL INST	RUCTI	ONS BEFORE C	OMPLETI	NG THIS FOR		
• •	PLICAT FOR STATE			A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State IVISION OF CORPORATIONS		F1I.ED			
DOCUMENT # P95000023300						97 AUG 18 AM 11: 00			
1. Corporation Name						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Cherry Creek Properties, Inc.									
150 Ear Suite	435		150 Eas Suite	Address st Palmetto Park Road 435 aton, FL 33432					
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Address, If Applicable						DO NOT WRITE IN THIS SPACE 4. Date Incorporated or Qualified			
4000 I a		Boulevard	4000 Island Boulevard Suite, Apt. #, etc.			To Do Business in Florida March 21, 1995			
Unit 1)		Unit 1706 City & State			5. FEI Number 65-05		Applied For Not Applicable	
Žip	Miami,	Florida Country	Z ip	Miami,	Florida Country	6.	OF STATUS DESIRED X	\$8.75 Additional Fee required for a Certificate of Status	
33160	and Street Ac	USA dresses of Each Officer and/o	33160	rida nonprofi	USA	ast 3 directors)		To I de lineare d'Olaman	
Title(s)	2	Name of Officers and/or Directors	<i></i>		Street Address of Each Officer and/or Director NOT Use Post Office Box N	1	City	/ State / Zip	
D/P/ VP/C Jordan Ross				4000 Island Blvd., Unit 1706 North Miami, Florida 33160 100022703413 -08/19/97-01031-002					
					REINST	ATEM		75 ****923.75 2-97 568-18-97	
8. Name and Address of Current Registered Agent Name							ddress of New Register	red Agent	
Robert S. Saraga, Esq. Lowenthal, Landau, Fischer & Bring, P.A. Street Address: 515 East Suite 435 Boca Raton, FL 33432 Brian J. Street Address: 515 East Suite 15 City						P.O. Box Number is Not Acceptable) Las Olas Boulevard : 00 State Zip Code			
10. I, being Signature o Registered		ne registered/agent of the above	ve named corpo	<u> </u>					
11. Do De	es this pt. of R	corporation pay a levenue under S.	ny intanç 199.032,	gible tax Florida	to the Statutes. Yes	☐ No ☐		er side for information intangible tax.)	
lease the certify the this rein	ne Division of hat I am an on instatement a ved by the or	polication the Teason lor disso	y of non-compli ver or trustee e plution has bee	iance with Sompowered to en eliminated	ection 119.07(3)(k) in the evi o execute this application as I, the corporate name satisfi	ant that the inform provided for in ches the requirement	ation supplied is deemed hapter 607 or 617, F.S. I hts of section 607.0401 o	l exempt from public access. I further certify that when filing	

Jordan Ross, President

SIGNATURE:

8/11/97 Date (954) 920-9100 Daytime Phone #