
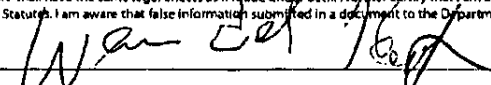


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

| LIMITED PARTNERSHIP REINSTATEMENT | |  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS | |
|--|--|---|-----------------------------------|
| DOCUMENT # A05000000777 | | | |
| 1. Name of Limited Partnership KENT PARTNERS, LLLP | | | |
| 2. Principal Office Address - No P.O. Box # 4173 Shell Road | | 3. Mailing Office Address 4173 Shell Road | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State Sarasota, FL | | City & State Sarasota, FL | |
| Zip 34242 | Country | Zip 34242 | Country |
| 8. Name and Address of Current Registered Agent | | | |
| Name Cross Street Corporate Services, LLC | | | |
| Street Address (P.O. Box Number is Not Acceptable) 200 S. Orange Avenue | | | |
| Suite, Apt. #, Etc. | | | |
| City Sarasota | | Zip Code FL 34236 | |
| 4. Date Formed or Registered To Do Business in Florida April 19, 2005 | | | |
| 5. FEI Number 20-2810593 | | Applied For <input type="checkbox"/> Not Applicable | |
| 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status | | | |
| 7. FEES: Filing Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$88.75 for each year due this office. Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records. | | | |
| E-mail Address: winkieengels@gmail.com E-Mail address to be used for future annual report notices. | | | |
| 9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)  DATE 12/18/12 (REGISTERED AGENT MUST SIGN) | | | |
| A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. | | | |
| 10. Name(s) of General Partner(s) | Address of Each General Partner (Do NOT Use Post Office Box Numbers) | City, State and Zip Code | 10a. Registration Document Number |
| WFK, LLC, a Florida limited liability company | 4173 Shell Road | Sarasota, FL 34236 | L05000037649 |
| 500242972495 12/20/12--01023--019 **\$113.75 | | | |
| Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. | | | |
| 11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. | | | |
| SIGNATURE  | | DATE December 18, 2012 | |
| Typed or Printed Name of General Partner Signing Form: Wendel F. Kent, Manager of General Partner | | Telephone Number (941) 349-1979 | |