PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM			
LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF STA Secretary of State DIVISION OF CORPORATIONS		PK 12: 30
DOCUMENT # A3047!  1. Name of Limited Partnership		TALLAHASSEE.	FLORIDA
H&H Center,	LTD.	KS	
2. Principal Office Address - No P.O. Box	Mailing Office Address	12277623365	35720.00 3572000.00
841 Nicolet AVE.	3623 E. USCEDIA K Suite, Apt #, etc	REINSTATEME  4. Date Formed or Registered	NT12013-16
City & State Winter Park El	City & State Geneva Fl.	To Do Business in Florida (	)8 08 199 b  Applied For
ZIP Country 32789 USA	210 32732 USA	59-3038582 6. CERTIFICATE OF STATUS DESIRED	S8 75 Additional Fee required
8. Name and Address of G	Current Registered Agent	7. FEES:	
Name Toho T Hanes		Filing Fee(s): \$411.25 for each ye Supplemental Fee(s): \$88.75 for	
Street Address (P.O. Box Number is Not Acceptable) 3623 E. USCEO 19 Rd.		Penalty Fee(s): \$500 for each year	-
Suite, Apt #, Etc		E-mail A	ddress:
			$\bigcap \alpha . I = \alpha .$
city Genera	FL 32732	- Unanes U33U E-Mail address to be used t	or future annual report notices
9. Pursuant to the provisions of section 620 1810 or 620 191 Florida Statutes.	1.2 32.3	E-Mail address to be used f	
9. Pursuant to the provisions of section 620 1810 or 620 19	09. Flonda Statutes. Thereby accept the appointment	E-Mail address to be used to of registered agent. I am familiar with, and accept to DATE.	
9. Pursuant to the provisions of section 620 1810 or 620 191 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment) X  A GENERAL PARTNER THAT IS	09. Flonda Statutes. I hereby accept the appointment	E-Mail address to be used to of registered agent. I am familiar with, and accept the SIGN)  DATE  PARTNERSHIP OR OTHER	he obligations of Chapter 620,
9. Pursuant to the provisions of section 620 1810 or 620 191 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment) X  A GENERAL PARTNER THAT IS	(REGISTERED AGENT MUST  Address of Each General Partner (Do NOT Use Post Office Box Numbers)	E-Mail address to be used to of registered agent. I am familiar with, and accept to DATE.  SIGN)  PARTNERSHIP OR OTHER /E WITH THIS OFFICE.  City, State and Zip Code	the obligations of Chapter 620,  / 2 - 2 2 - / 6  BUSINESS ENTITY  10a. Registration Document Number
9. Pursuant to the provisions of section 620 1810 or 620 19 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS MUST 10.  Name(s) of General Partner(s)	(REGISTERED AGENT MUST  Address of Each General Partner (Do NOT Use Post Office Box Numbers)	E-Mail address to be used to of registered agent. I am familiar with, and accept to DATE.  SIGN)  PARTNERSHIP OR OTHER /E WITH THIS OFFICE.  City, State and Zip Code	the obligations of Chapter 620,  / 2 - 2 2 - 1 6  BUSINESS ENTITY  10a. Registration Document Number
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9. Pursuant to the provisions of section 620 1810 or 620 19 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment) X  A GENERAL PARTNER THAT (S  MUST 1  10. Name(s) of General Partner(s)  Julia Mae Hanes  Harry L. Hanes	(REGISTERED AGENT MUST  ACORPORATION, LIMITED BE REGISTERED AND ACTIV  Address of Each General Partner (Do NOT Use Post Office Box Numbers)  36.23 E. OSCEOLA  RT)	E-Mail address to be used to differ registered agent. It am familiar with, and accept to DATE.  SIGN)  PARTNERSHIP OR OTHER PARTNERSHIP OR OTHER PARTNERSHIP CODE  City, State and Zip Code  GENEVA, FL	Registration Document Number  A3047
9. Pursuant to the provisions of section 620 1810 or 620 19 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment) X A GENERAL PARTNER THAT MUST 10. Name(s) of General Partner(s)  Julia Mae Hanes  Harry L. Hanes  Note: General partners MAY NOT be	(REGISTERED AGENT MUST A CORPORATION, LIMITED BE REGISTERED AND ACTIV  Address of Each General Partner (Do NOT Use Post Office Box Numbers)  36.23 E. OSCEOLA  RD  RD  Re changed on this form; an am-	E-Mail address to be used to of registered agent. It am familiar with, and accept to DATE.  SIGN)  PARTNERSHIP OR OTHER //E WITH THIS OFFICE.  City, State and Zip Code.  GENEVA, FL	Registration Document Number  A30471
9. Pursuant to the provisions of section 620 1810 or 620 19 Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment) X  A GENERAL PARTNER THAT (S  MUST 1  10. Name(s) of General Partner(s)  Julia Mae Hanes  Harry L. Hanes	(REGISTERED AGENT MUST)  Address of Each General Partner (Do NOT Use Post Office Box Numbers)  36.23 E. OSCEOLA  RD  RD  RD  RD  RD  RD  RD  RD  RD  R	E-Mail address to be used to of registered agent. It am familiar with, and accept to part of registered agent. It am familiar with, and accept to part of the limit of the limit of partnership, receiver or trustee empowered of the limited partnership, receiver or trustee empowered.	Registration Document Number  A 3047    Document Number    A 3047    Document Number    A 3047

Typed or Printed Name of General Partner Signing Form Julia Mal Hanes Telephone Number 401-375-5745

CORREction To Grantnero Per Conversation With John HANES 12/29/2016 KS