PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSI REINSTATEM	HIP		TMENT OF STAT y of State orporations	ΓE	FIL! 2007 APR 25		
DOCUMENT # B0200000236 1. Name of Limited Partnership				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
HARTOL HOLDINGS LIMITED PARTNERSHIP							
2. Principal Office Addre	ess - No P.O. Box #	3. Mailing Office Addre	3. Mailing Office Address				
3675 De	cos-McLeod	samo			CR2E039	(1/07)	
Suite, Apt. #, etc.	COS-MCLEOU	Suite, Apt. #, etc.					
1400		05/05,71,010			4. Date Formed or Registered		
City & State		City & State			To Do Business in Florida 0	7/03/2002	
Las Vegas, NV				5. FEI Number	Applied For		
Zip	Country	Zip	Country		65-1028816	Not Applicable	
89121	USA		ĺ		CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent					7. FEES:		
Name					Filing Fee(s): \$411.25 for each year due this office.		
Harvey :	S. Tolin				Supplemental Fee(s): \$88.75 for 6	△{ /	
Street Address (P.O. Box Number is Not Acceptable)					Penalty Fee(s): \$500 for each year or part thereof limited		
7355 N W 41 St.				partnership revoke	, ,		
Suite, Apt. #, Etc.					A \$500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notices.		
City Miami	Zip Code 33166		By checking this box, you are certify received and requesting the \$500 p	ring the prior notices were not			
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)					4/17/07		
(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 G	eneral Partner(s)		General Partner Office Box Numbers)		City, State and Zip Code	10a. Registration Document Number	
Harvey :	S. Tolin	3675 Peco	s-McLeon#	400	0, Las Vegas, NV 89121	20060437330-88	
					5001015 05/04/0701056	20505 -004_++1500_00	
			R		STATEMENT	05-07	
			200				
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 filling is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, Florida Statutes are legal effects as if made under each I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as revented by chapter 620, Florida Statutes							
SIGNATURE							
Typed or Printed Name of General Paymer Signing Form Harvey S. Tolin Telephone Number 3905-718-9831							