


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 05 SEP 13 AM 10:55																													
DOCUMENT # L01000008776																																	
1. Limited Liability Company's Name <div style="font-size: 1.2em; margin-top: 10px;">LAND SHARK FUND, LLC</div>																																	
2. Principal Office Address 32 Shady Lane Suite, Apt. #, etc. City & State Tequesta, Florida Zip 33469		3. Mailing Office Address same as #2 Suite, Apt. #, etc. City & State Tequesta, Florida Zip 33469		4. State/Country of Formation Florida, USA 5. Date Organized or Qualified To Do Business in Florida 06/01/2001 6. FEI Number 651110080																													
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status				Applied For Not Applicable																													
8. Name and Address of Current Registered Agent Name: Patrick F. Mahoney Street Address (P.O. Box Number is Not Acceptable): 32 Shady Lane Suite, Apt. #, Etc.: City: Tequesta State: FL Zip Code: 33469																																	
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent: Patrick F. Mahoney Date: September 1, 2005 REGISTERED AGENT MUST SIGN																																	
10. Names and Street Addresses of Managing Members/Managers <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Managing Members/Managers</th> <th style="width: 30%;">Street Address of Each Managing Member/Manager</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MEM</td> <td>Wheatrick, Inc.</td> <td>3100 Silverado Tr.</td> <td>St. Helena, CA 94574</td> </tr> <tr> <td>MEM</td> <td>Patrick Mahoney</td> <td>32 Shady Ln. Tequesta</td> <td>Tequesta, FL 33469</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>						Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MEM	Wheatrick, Inc.	3100 Silverado Tr.	St. Helena, CA 94574	MEM	Patrick Mahoney	32 Shady Ln. Tequesta	Tequesta, FL 33469																
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11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager: Patrick F. Mahoney Date: 9/1/05 Daytime Phone #: 5617470577 Typed or printed name of signing Managing Member/Manager: PATRICK F. MAHONEY																																	