PLEASE'READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

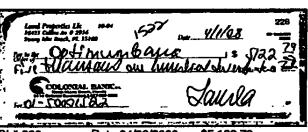
	ALL MOTHOUTHORS BELLONE	- April 18th
LIMITED LIABILITY COMPANY REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 2010 HAY -7 PM 1: 46
DOCUMENT # L 04000052434 1. Limited Liability Company's Name		SECRETARY OF STATE TALLIAHASSEE, FLORIDA
LAND PROPERTIES, LLC.		100176900991 04/21/1001028014 **143.75
3. Division and the second	T 2 44 11 05 444	CR2E041 (11/09)
2. Principal Office Address - No P.O. Box #	3. Mailing Office Address	
16425 COLLINS AVE.	16425 COLLIDS AVE.	4. State/Country of Formation FLORIDA / USA
Suite, Apt. #, etc.	Suite, Apt. #, etc.	FLORIDA / USH 5. Date Organized or Qualified / /
#2916	#2916	To Do Business in Florida 07/14/2004
City & State	City & State	6. FEI Number Applied For
SUNNY ISLES BEACH, FL	SUDDY ISLES BEACH, FL	2-015-3/634 Not Applicable
Zip Country	Zip Country	7. \$5.00 Additional Fee required
33160 USA	33160 USA	for a Certificate of Status
	f Current Registered Agent	
GREG LANDAU		☑ A \$100 reinstatement fee is imposed, except
Street Address (P.O. Box Number is Not Acceptable)		in circumstances which the entity did not
16425 COLLIPS AVE.		receive the prior notices. By checking this box, you are certifying the prior notices were
Suite, Apt. #, Etc.		not received and requesting the \$100
APT. # 29/6 City /? State Zip Code		reinstatement be waived.
SURRY ISLES BEACH FL 33/60		
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 Date 4/14/2010		
REGISTERED AGENT MOST SIGN		
10. Names and Street Addresses of Managing Mer	nbers/Managers	
Titles Name of Managing Members/Manag	Street Address of Each ers Managing Member/Mana	
MGR GREG LANDAU 16425 COLLINS AVE. APT. #2916 SUNNY ISLES BEACHFL 33160		
REINCTATELETE		
REINSTATEMENT 06-10 AL		
11. E-mail Address: GRE GLANDAU @ AOL.COM		
12. 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 discolution 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 midmation indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.		
Managing Member/Manager Date 4/14/20/0 Daytime Phone # (305) 785-0088		
Typed or printed name of signing Managing Member/Manager GREG LANDAU		

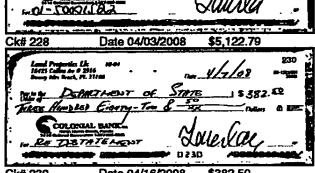


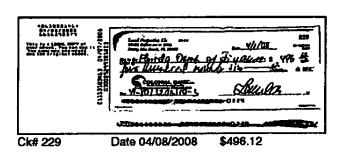
Business Advantage Checking

ACCOUNT NUMBER

STATEMENT PERIOD April 1, 2008 - April 30, 2008







ATTN: AGNES LANT

DEAR MRS. LUNT.

AS PER OUR CONVERSATION, ATTACHED IS A

COPY OF RE-INSTATEMENT CHECK FOR LAND PROPERTIES, LIC

FROM 2008. A CHECK FOR \$ 133.75 FOLLOWED FOR

2009. AND ATTACHED HEREIN IS A NEW CHECK FOR

2010. PLEASE NOTE THAT THE ADDRESS OF THE

REGISTERED AGENT / MANAGER / AND MAILING ADDRESS

HAS CHANGED AND WE HAVE NOT RECIEVED ANY

CORRESPONDENCE FROM THE DIVISION OF CORPOLATIONS FOR

APPROXIMATELY 2 YEARS NOW (ONLY BY PHONE). THANK YOU

FOR YOU HELD IN THIS MANTER.