2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000000738

Entity Name: HELP FOR HAITLING.

FILED Jul 19, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1121 SOUTH B ST 1129 SOUTH B ST

LAKE WORTH, FL 33460 US

LAKE WORTH, FL 33460 US

New Mailing Address: Current Mailing Address:

PO BOX 802 1129 SOUTH B ST

W PALM BCH, FL 33402 LAKE WORTH, FL 33460 US

FEI Number: 65-0562959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOCH, SANDRA L KOCH, SANDRA L 1121 SOUTH B ST 1129 SOUTH B ST

STE#2 LAKE WORTH, FL 33460 US

LAKE WORTH, FL 33460 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SANDRA L. KOCH 07/19/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

LA FORTUNE, JEAN RV Name: Name: Address: 2159 PORT LAND AV Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

KOCH, SANDRA L Name: Name: KOCH, SANDRA L Address: 1121 SO. B ST #2 Address: 1129 SO. B ST City-St-Zip: LAKE WORTH, FL 33414 City-St-Zip: LAKE WORTH, FL 33414

Title: () Delete Title: () Change () Addition

RENESCA, ROBERT REV Name: Name: 899 NE 83 ST Address: Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA L. KOCH SD 07/19/2008