PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 04 OCT 21 AM II: 04
DOCUMENT # P0000006181 1. Corporation Name		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Cansuling Solutions, Inc.		900042063998 1072170401032002 ***308.75
2. Principal Office Address	3. Mailing Office Address	1
21301 Powerline Rd.	21301 Powerline Kd.	REMSTATEMENT 03-UY
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite # 307 D	4. Date incorporated or Qualified
City & State	City & State	To Do Business in Florida — 120 200 🔾
Boua Ruton, FL	Boux Raton, FL,	5. FEI Number 65-0983201 Applied For Not Applicable
33433 Country (Palm Beach)	33/33 Country (Palm Beach)	6. CERTIFICATE OF STATUS DESIRED 38.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name LOCI Fischer		
Street Address (P.Q. Box Number is Not Acceptable)		
21301 Powerline Kd. Suite, Apt. #, Etc.		
307 D		
City Boug Ruter		State Zip Code FL 33 4 3 3
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.		
Signature of Registered Agent Date 10/18/0 V		. ,
REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	
President Lun Fischer	- 4138_NW 157 PC= - h all also Paverline Rd, Bus Suite 3070 Bola Rutay, FL +120 33433	librers - Deerfield Beach, FL 33492. Boug Robin FL 33433
	2130) Paver Ane Rd. Bus Swite 3070 Bus Rutas FL Add	ones Brug Robe 21 33 122
	33/3-3	COURTINATE STATES
/		\$1 w/25
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been ellminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #		

Counseling Solutions, Inc. Lori Fischer, LMHC

21301 Powerline Rd. Suite # 307D Boca Raton, FL 33433

Phone (561) 885-1744 Fax (561) 852-3442

October 18, 2004

To Whom It May Concern:

I talked with someone at the Florida Department of State, Division of Corporations today regarding getting my corporation reinstated. I moved my office in January 2002 and was not aware that I needed to file a change of address with your office. My mail was not forwarded correctly and I never received any notification to file the annual business report. for the year 2003 or 2004. I was told over the phone that it was documented that the notices were returned to you by the post office and were not forwarded, so, the reinstatement fee will be waived and I am just responsible for the annual fee for 2003 and 2004. I found out that my corporation was inactive when I applied for a loan and put all the pieces together. It is very important that I receive a certificate of status, once the reinstatement has been done in order to process my loan. I greatly appreciate any assistance in speeding up this process and having the certificate mailed to my office. Please note that my office address has changed, in order to avoid future problems. My new address is: 21301 Powerline Rd. Suite# 307D

Boca Raton, FL 33433

Please mail any future correspondence to the above address. Thank you for your assistance in this matter.

Sincerely,

Lori Fischer FEI # 65-0983201

Document # P0000006181