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CR2E081 (01/05)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.				
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 05 AUG 17 PH 1:53		
DOCUMENT # POZOOO 1. Corporation Name 12400 TREASUM	0073629 KR ISCHO, INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Office Address	3. Mailing Office Address			
460 E. LEMON ST.	· · · · · · · · · · · · · · · · · · ·	MAE X.		
Suite, Apt. #, etc.	Suite, Apr. #, etc.	(1) NW		
STUDIO A	• (4. Date incorporated or Qualified To Do Business in Florida 7/5/82		
City & State	City & State	5. FEI Number Applied For		
TARPONI SPANGS, FL		04-3701760 Not Applicable		
34689 Country 34689 USA	Zip Country Country	6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status		
	7. Name and Address of Current Registers	!		
Name	Name			
STRPHFW Street Address (P.O. Box Number is No				
460 E	E. CRMON ST.			
Suite, Apt. #, Etc.	A	·		
City		State Zip Code		
TARPOR		FL 34689		
	we named corporation, am familiar with and accept the ob	, ,		
Signature of Registered Agent		Date 9/1/05		
RE	EGISTERED 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		r City/States/24p		
Y STRPHEN S. G	nimmh 460 E. LEMAN STUDIO A	TARRIN STRINGS, FC 9		
DEFFERY R. ST		7. 2500 HONOLULU, 14; 96813		
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		08/23/0501005007 ** <del>998.7</del> 5		
		105D-07		

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 807 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, 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)(f), F.S. The information indicated on this application is true and accurate, and my algnature shall have the same legal effect as if made under oath.

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Cald Devictor Phono #

ZeelZ

## S Holdings LLC 55 Merchant Street Suite 1500 Honolulu, HI 96813

March 2, 2005

Department of State Attn: Michelle Milligan Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: 12400 Treasure Island, Inc. 12400 Treasure Island LLC

Dear Ms. Milligan:

Please accept this letter as authorization for the State of Florida to allow Stephen S. Grimme to reinstate 12400 Treasure Island, Inc. as a Florida corporation and registered name. I am representing that I have no problem with this reinstatement.

This reinstatement is also very important as 12400 Treasure Island LLC, a Delaware LLC, is registered as a foreign LLC in the State of Florida with 2 members; S Holdings LLC and 12400 Treasure Island, Inc. You will also notice that the principal office and mailing address of 12400 Treasure Island LLC is 460 E. Lemon Street, Studio A, Tarpon Springs, the current address for 12400 Treasure Island, Inc. It is important to us and my partner, Stephen S. Grimme, President of 12400 Treasure Island, Inc. to keep the operating agreements for this corporation intact.

Should you have any questions or comments, please don't hesitate to call.

Sincerely,

Jenney Stone
Manager and Member

S Holdings LLC

L.G.

NOTARIZE (GOC attached)