192

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # P05000131587

1. Corporation Name — Total Cool Inc.
3201 Rosebud Lane #8105
Winter Park, Florida 32792

06-07   CR2E081 (12/05)

2. Principal Office Address	**3.** Mailing Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 51-0555850   ☐ Applied For ☐ Not Applicable

Zip	Country	Zip	Country

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Mata, Domingo P.

Street Address (P.O. Box Number is Not Acceptable) 3201 Rosebud Lane # 8105

Suite, Apt. #, Etc.

City Winter Park	State FL	Zip Code 32792

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 _Domingo V. natata_   REGISTERED AGENT MUST SIGN   Date 1/6/07

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	City / State / Zip
P, VP	Mata, Domingo P	3201 Rosebud Lane # 8105	Winter Park, Fl 32792
		0000086174580 01/25/07--01008--015 **300.00	

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 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 contained in Chapter 119, 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: _Domingo V. natata_   1/6/07   407-679-7450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

2 82

January 6, 2007

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Fl 32314

Dear Sir or Madam:

I am attaching the Corporation reinstatement form for Total Cool Inc and a check for
$300.00 for year 2006 and 2007. I am requesting to please waive the reinstatement fee
because I moved and did not receive the report notice. (2006)

Thank you very much for your attention to this matter and please contact me if further
information is requested.

Sincerely,

Domingo P Mata