PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PAGE 15/2

REINSTATEMENT				ecretary	TMENT OF STATE y of State orporations	SECHETARY / SELTA BIVISION OF COLUMN CARCEN 11 JAN -4 PH 12: 29			
DOCUMENT # P97000105920 1. Corporation Name						1	TOCHE MET	114. 53	
Ken Ha	all, Inc.								
						90) 01/04/	01894301 1101049015	09 **750.00	
2. Principal Office Address - No P.O. Box # 3. Mailing 18217 Griffith Rd. 1262 S					ff Drive				
Suite, Apt. #, e	etc.		Suite, Apt. #, etc	etc.		Date Incorp	CR2E081 (6/10) 4. Date Incorporated or Qualified		
City & State			City & State	e .		To Do Busin	ness in Florida 12/16/9		
Lutz, Florida				Fort White, Florida		5. FEI Number 59348572		Applied For Not Applicable	
^{Zip} 33548	l <u>-</u>	J.S.	32038		U.S.	6. CERTIFICATE	RTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
<u>.</u>	7	. Name and Address of	Current Registe	red Agen	it				
Name for	r: G.K <u>. H</u>	iall (deceased)	/ Trustee:	Kare	n Hall Zetrouer	1			
	ess (P.O. Box N Bluff Drive	Number is Not Acceptable)	J.			1			
Suite, Apt. #,						1			
City Fort White					State Zip Code FL 32038				
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob- Signature of Registered Agent Korn Law Betronen daughter of decased REGISTERED AGENT MUST SIGN						ibligations of section	on 607.0505 or 617.0503, F.S Date 12/30/2010		
9. Names ar	and Street Addi	resses of Each Officer and	I/or Director (Florid	da nonpro	fit corporations must list at le	east 3 directors)			
Titles		Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / Sta	ite / Zip	
Pres. (G.K. Hall (dećeased)			1262 SW Bluff Drive			Fort White,	FL 32038	
	formerly of 18217 C					riffith Rd.	Lutz, FL 335	48	
	passed away Apr,					08, 2010			
	Dad had a st					Toke			
	and was unab					le to			
completejonnis						~			
^{10.} E-mail	Address:	: karen@zetrouer.co	<u>om</u>	(To I	be used for future annual report	d notification)			
filing this re fees owed	reinstatement a	application, the reason for c ration have been paid. I furt	dissolution has bee	e empowe en elimina	ered to execute this applica	ation as provided isfies the requirement	for in chapter 607 or 617, F.S. ents of section 607.0401 or 6 e, and my signature shall hav	17.0401, F.S., that all	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

12/30/2010

352 316 1707 (cell)

Page 201 Dear Sirs: I opoke with Ms Karthy Askin on 12/30 negarding my patheris corporation. We will be dissolving the corporation on January. We only needed to reinstato to wrap up Vadá affaira for 2010. Thank you. Karen Hall Jetroner Træstee of YKHall