

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 NOV -1 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 888 000101326

1. Corporation Name

Crestline Holdings, Inc.

2. Principal Office Address - No P.O. Box #

10691 Cambay Drive
Suite, Apt. #, etc.

3. Mailing Office Address

10691 Cambay Drive
Suite, Apt. #, etc.

City & State

Boynton Beach, Florida

Zip 33437

Country
USA

City & State

Baynton Beach, Florida

Zip 33437

Country
US

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

65-0976625

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name Daniel E. Rosenblatt

Street Address (P.O. Box Number is Not Acceptable)
10691 Canyon Drive
Suite, Apt. # Etc.

Suite, Apt. #, Etc.

City Brynthon Beach

State
FL

Zip Code
23437

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 10-25-07

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	City / State / Zip
Pres	Daniel E. Rosenblatt	10691 Cambay Drive	Brynton Beach, FL 33437
VP	Rebecca H. Rosenblatt	10691 Cambay Drive	Brynton Beach, FL 33437.
			<div data-bbox="1008 1650 1382 1677">800112301688</div> <div data-bbox="980 1682 1453 1707">11/14/07-01051-012 **300.00</div>
	<div data-bbox="206 1682 722 1734">REINSTATEMENT</div> <div data-bbox="292 1759 363 1814">RH</div>	11-07	

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 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:

Daniel E. Rosenblatt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-25-0

Date _____

561-715-1905

Daytime Phone #