PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K14602

FILED
99 SEP -2 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporate Name
Southside Toyota of Jacksonville, Inc.
Name change to: SSTJ, INC.

Principal Place of Business
17 Sea Bass Lane
Ponte Vedra Beach, FL
32082

Mailing Address
17 Sea Bass Lane
Ponte Vedra Beach, FL
32082

If these addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida
January, 1988

5. FEI Number
59-2880389
☐ Applied For
☐ Not Applicable

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

7. Name and Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D, P	Michael A. Clauder	3130 Wasson Road	Cincinnati, Ohio 45209
D, VP	John J. Lynch	15 Maria Place	Ponte Vedra Beach, FL 32082
D, S, T	Jeffrey L. Nelson	3130 Wasson Road	Cincinnati, Ohio 45209

REINSTATEMENT 95-99

V. SHEPARD SEP 16 1999

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***1393.75 ***1358.75

8. Name and Address of Current Registered Agent
Robert Skeels, Esquire
1821 3d. Street North
Jacksonville Beach, FL 32250

9. Name and Address of New Registered Agent
Name V. SHEPARD SEP 16 1999
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc
City | State FL | Zip Code

CR2EC61 (12/98)

I hereby certify that the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature Robert Skeels
REGISTERED AGENT MUST SIGN
Date September 1, 1999

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

I, the undersigned officer or director of 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 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 and taxes due 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 is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: John F Lynch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-1-99
Date

904-285-4022
Daytime Phone #