

SECRETARY OF STATE
DIVISION OF CORPORATIONS

18 FEB -3 PM 12:42

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

000308689540

DOCUMENT # P11000085518

1. Corporation Name

JURATOYS US CORP

2. Principal Office Address - No P.O. Box # 40 Lane Road Suite, Apt. #, etc. C/O Alex Toys, LLC City & State Fairfield, New Jersey Zip 07004		3. Mailing Office Address 40 Lane Road Suite, Apt. #, etc. C/O Alex Toys, LLC City & State Fairfield, New Jersey Zip 07004	
Country US	Country US	Country US	Country US

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida
September 28, 2011

5. FEIN Number
33-1222376

<input checked="" type="checkbox"/>	Applied For
<input type="checkbox"/>	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
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City
Tallahassee

State FL	Zip Code 32301
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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 Roxanne Turner REGISTERED AGENT MUST SIGN
Date 2/1/2018
Asst. Vice President

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/D	Anthony DiMichele Jr.	40 Lane Road	Fairfield, New Jersey, 07004
CEO	Neil B. Friedman	40 Lane Road	Fairfield, New Jersey, 07004
VC/D	John M. Belniak	10 Glenville Street, First Floor	Greenwich, CT 06831

10. E-mail Address: _____
(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 617.155, F.S.

SIGNATURE: Roxanne Turner 1/31/18 973-747-6278
DATE DAYPHONE

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 052048 4803290

AUTHORIZATION :

Lyndee Clemon

COST LIMIT : \$ 10,67.50

ORDER DATE : January 31, 2018

ORDER TIME : 9:58 AM

ORDER NO. : 052048-005

CUSTOMER NO: 4803290

RECEIVED
2018 FEB - 1 AM 10:51
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: JURATOYS US CORP

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX CERTIFIED COPY
- PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - Ext#

EXAMINER'S INITIALS _____

*Please call
for cost
approval if
cost is
wrong*