PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. DA DEPARTMENT OF STATE Katherine Harris Secretary of State 99 APR 13 14 7:45 DOCUMENT # P96000025938 1. Corporation Name STORY WHITE COLUMN :ក្រាស់<sup>ក្រុ</sup>ង Magruder Consulting, Inc. Principal Place of Business 1085 Park Avenue North 1085 Park Avenue North Winter Park, FL 32789 Winter Park, FL 32789 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 3/25/96 Suite, Apt #, etc. Suite Apt #, etc 5. FE! Number Applied For City & State City & State 59-3369525 Not Applicable Zip Country CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) and/or Directors Officer and/or Director (Do NOT Use Post Office Box Numbers) City / State / Zip Winter Park, FL 32789 PD G. Brock Magruder, Sr. 1085 Park Avenue North 200002840502~~3 -04/15/99--01092--005 \*\*\*\*450.00 - \*\*\*\*450.00-200002840502**~**~3 -04/15/99--01092--006 \*\*\*\*\*15.00 \*\*\*\*\*15.00 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent G. Brock Magruder, Sr. Street Address (P.O. Box Number is Not Acceptable) 1085 Park Avenue North Winter Park, FL 32789 Suite, Apt. #, Etc. State | Zip Code 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505. F Signature of AEGISTERED AGENT MUST SIGN egistered Agent Date This corporation owes the current year (See other side for information on intangible tax.) Yes 🔲 No 🔯 Intangible Personal Property Tax due June 30. 12. Learlify that Lam 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 under section 119.07(3)(i), 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: OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. Brock Magruder, Sr., President

## ROBERT P. SALTSMAN, P. A.

## Attorney at Law Certified Public Accountant

Street Address: 222 West Comstock Avenue, Suite 210 Winter Park, Florida 32789 Post Office Box 2146 Winter Park, Florida 32790 Telephone: (407) 647-2899 Fax: (407) 628-2307

April 8, 1999

Mr. Buck Kohr Corporate Specialist Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Magruder Consulting, Inc. - Application for Reinstatement

and Magruder Family Partnership, Ltd. (Renamed Park Avenue North, Ltd.)

Ref. Number: W99000007873

Dear Mr. Kohr:

Enclosed are duplicate executed originals of the Certificate of Limited Partnership of Park Avenue North, Ltd. We had previously filed this Certificate under the name of Magruder Family Partnership, Ltd., but it was rejected for the reasons stated in the attached letter of explanation dated April 1, 1999. We are resubmitting the Certificate under the new name of Park Avenue North, Ltd., which has been revised pursuant to the letter of explanation.

In addition to the above, enclosed is the Application for Reinstatement for the general partner, Magruder Consulting, Inc. The Corporation had not filed any of its annual reports because it had not received an annual report from the Secretary of State since the filing of its Articles of Incorporation. Under the circumstances, we would respectfully request that the penalty for reinstatement be abated. Enclosed is a check in the amount of \$450.00 to pay the annual fees which are due to date.

We appreciate and thank you for your attention and consideration. Please call us immediately if there are any questions.

Sincerely

Robert P. Saltsman

RPS/no Enclosures