

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

00 APR -3 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

~~59-3499025~~
P98 000028271

1. Corporation Name

UpmarkIt, Inc.

Previous Address: 150 Country Circle Dr. E.
Port Orange, FL 32124

2. Principal Office Address

246 S. Beach Street
Suite 201

3. Mailing Office Address

246 S. Beach Street
Suite 201

City & State

Daytona Beach, FL

City & State

Daytona Beach, FL

Zip

32114

Country

USA

Zip

32114

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

March 20, 00

5. FEI Number

59-34-99025

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

Amyah Parrish

800003221978-6

Street Address (P.O. Box Number is Not Acceptable)

228 + 1/2 S. Beach St.

-04/24/00--01174--001

****300.00 ****300.00

Suite, Apt. #, Etc.

Daytona Beach

City

Daytona Beach

State

FL

Zip Code

32114

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

Amyah P. Parrish

REGISTERED AGENT MUST SIGN

Richard G. Wheeler

Date March 20, 00

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
Vice Pres.	Richard G. Wheeler	210 S. Beach Street	Daytona Beach, FL 32114
Ceo/Pres.	Amyah Parrish	228 + 1/2 S. Beach Street	Daytona Beach, FL 32114
Treasurer	Nick Conte	6432 Renaissance Dr.	Day Port Orange, FL 32124

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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 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:

Amyah P. Parrish

Amyah P. Parrish

March 20, 00

904-255-4135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ext 107

CR2001 (9/99)