PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1996 NOV 27 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000035669

1. Corporation Name

FORTY SEVEN INVESTMENTS, INC.

Principal Place of Business	Mailing Address
~~883 NE 167TH ST~~	~~883 NE 167TH ST~~
~~STE 321~~	~~STE 321~~
~~N MIAMI BEACH FL 33162~~	~~N MIAMI BEACH FL 33162~~
~~US~~	~~US~~

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

REINSTATEMENT 9411B 11/27/96

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
7311 NW 12 Street	7311 N.W. 12 Street
Suite, Apt. #, etc. Suite 13	Suite, Apt. #, etc. Suite 13
City & State Miami, FL	City & State Miami, FL
Zip 33126 County USA	Zip 33126 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 05/18/1993

5. FEI Number: 65-0410467 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
~~D~~	~~DA GAMA LIMA, GUSTAVO R~~	~~169 E FLAGLER ST SUITE 1524~~	~~MIAMI FL 33131~~
~~D~~	~~DA GAMA LIMA, MARILDA G~~	~~169 E FLAGLER ST SUITE 1524~~	~~MIAMI FL 33131~~
D,P	Mendonca, Marlene C.	7311 N.W. 12 Street #13	Miami, FL 33126
D	Mendonca, Juliana C.	7311 N.W. 12 Street #13	Miami, FL 33126
			400002018794--0
			~~12/04/96 01001-014~~
			****383.75 ****383.75

8. Name and Address of Current Registered Agent

~~THOMPSON, DIGNEY~~
~~169 W FLAGLER ST~~
~~SUITE 1524~~
~~MIAMI FL 33131~~

9. Name and Address of New Registered Agent

Name: Marlene Mendonca
Street Address (P.O. Box Number is Not Acceptable): 7311 N.W. 12 Street
Suite, Apt. #, Etc.: Suite 13
City: Miami State: FL Zip Code: 33126

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Marlene Carol Mendonca Date: 11-26-96
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. 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: Marlene Carol Mendonca 11-26-96 305-592-8895
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #