PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

99 MAY 25 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
H99000012387 9

DOCUMENT # P97000025920

1. Corporation Name

251 ROYAL POINCIANA WAY, INC.

Principal Place of Business / Mailing Address

251 ROXAL POINCIANA WAY
PALM BEACH, FL 33480

REINSTATEMENT 98-99

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

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

4. Date Incorporated or Qualified To Do Business in Florida: 03/24/97

5. FEI Number: 65-0738128 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 additional fee required 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)

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
P	FELICE FORMAN	251 ROYAL POINCIANA WAY	PALM BEACH, FL 33480
VP	ALAN J. CIKLIN	251 ROXAL POINCIANA WAY	PALM BEACH, FL 33480
S/T	SAM FORMAN	251 ROYAL POINCIANA WAY	PALM BEACH, FL 33480

8/15/24

8. Name and Address of Current Registered Agent

ALAN J. CIKLIN, ESQ.
515iN. FLAGLER DRIVE, 17hh Floor
WEST PALM BEACH, FL 33401

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State FL | Zip Code

CP2E040 (10/98)

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

Signature of Registered Agent: [signature] — REGISTERED AGENT MUST SIGN — Date 5/24/99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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.

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SIGNATURE: [signature] V.P. — 5/24/99 — 561-832-5900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ALAN J. CIKLIN, ESQ. AS VICE PRESIDENT

May 24 '99 9:43 P.02