INSTRUCTIONS BEFORE COMPLETING THIS FORM. RTMENT OF STATE APPLICATION B. Mortham FOR rv of State FILED DIVISION OF CORPORATIONS 376777 DOCUMENT # 98 NOV 20 PM 1:22 1. Corporation Name SECRETARY OF STATE TALLAHASSEE. FLORIDA RINDOM GALLERIES INC. Principal Place of Business Mailing Address 5311 N.W. 77TH CT. 5311 N.W. 77TH CT. POMPANO BCH. FL 33073 POMPANO BCH, FL 33073 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 Date Incorporated or Qualified
 To Do Business in Florida 02/08/1971 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 59-1390094 Not Applicable 6 \$8.75 Additional Fee r Zip Country Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Title(s) City / State / Zip SPD RINDOM, ERNEST 5311 N.W. 77TH CT. POMPANO BCH, FL P RINDOM, HILDA 5311 NW 77TH CT POMPANO BCH FL -12/01/98--01083--012 ****150.00 ****150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent CR2E040 (9/98) RINDOM, HILDA & ERNEST Street Address (P.O. Box Number is Not Acceptable) 5311 N.W. 77TH CT. Suite, Apt. #, Etc. POMPANO BCH. FL 33073 City State Zip Code of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. 10. I, being appointed the registered agent Signature of Registered Agent 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Yes L Intangible Personal Property tax due June 30. No 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:

Rindom Galleries, Inc.

D/B/A ART MARKETING ASSOCIATES
5311 NORTHWEST 77TH CT.
COCONUT CREEK, FLORIDA 33073-3522
PH. (954) 429-9996 • FAX (954) 429-9991

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 323142



11/13/98

Gentlemen,

Please be advised that I have been a FL corporation since 1971 and would like to remain so. I have been very ill this summer and I regret to inform you that my renewal form was never received so that I did not pay my fee. I would be much obliged if you would waive the penalty and accept the enclosed check for my renewal. I spoke this day to a Mr. Tyrone.

Respectfully,

Ernest Rindom