PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
01 DEC 18 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 565926

1. Corporation Name: Nu-West Florida, Inc.

REINSTATEMENT 2001

2. Principal Office Address	**3.** Mailing Office Address
1200 W. Retta Esplanade	1200 W. Retta Explanade-#58
Suite, Apt. #, etc.: #58	Suite, Apt. #, etc.:
City & State: Punta Gorda, FL 33950	City & State: Punta Gorda, FL 33950
Zip:	Zip:
Country: USA	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 2-2-1978

5. FEI Number: 59-1793133 — 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: Edward L. Wotitzky, Esq.

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-12/28/01--01079--01
****750.00 ****750.00

Street Address (P.O. Box Number is Not Acceptable): 223 Taylor Street

Suite, Apt. #, Etc.:

City: Punta Gorda — State: FL — Zip Code: 33950

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: [signature] — REGISTERED AGENT MUST SIGN — Date: 12/12/01

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
P D	David Burris	5555 Anglers Ave, Suite 1 ~~Fort Lauderdale Fla~~	Fort Lauderdale, Fla 33312
VP D	Alan Norris	1200 W Retta Esplanade, #P-57A	Punta Gorda, Fla 33950
D	Bruce Flatt	1200 W. Retta Esplanade, # P-57A	Punta Gorda, Fla 33950
AS	Barry Wilhite	1200 W Retta Esplanade, #P-57A	Punta Gorda, Fla 33950
ST	Herbert Groenenboom	1200 W Retta Esplanade, #P-57A	Punta Gorda, Fla 33950

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: [signature] David Burris — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 12/7/01 — Daytime Phone #: 954-620-1017