PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
00 DEC 28 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 664918

1. Corporation Name: G & W TEMPS, INC.

REINSTATEMENT 96-00

2. Principal Office Address	3. Mailing Office Address
6710 Main Street	6710 Main Street
Suite, Apt. #, etc.: Suite 234	Suite, Apt. #, etc.: Suite 234
City & State: Miami Lakes, FL	City & State: Miami Lakes, FL
Zip: 33014 Country: USA	Zip: 33014 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 02/29/1980

5. FEI Number: 591975551 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $30.75 Additional Fee required for a certified copy.

7. Name and Address of Current Registered Agent

Name: Jerry Waites Williams

Street Address (P.O. Box Number is Not Acceptable): 14200 Leaning Pine Drive

700003568607--3
-01/24/01--01006--030
***1350.00 ***1350.00

Suite, Apt. #, Etc.:

City: Miami Lakes | State: FL | Zip Code: 33014 US

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: _____ REGISTERED AGENT MUST SIGN Date: December 27, 2000

CR2E061 (5-99)

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
V/S/D	Jerry Waites Williams	14200 Leaning Pine Drive	Miami Lakes, FL 33014
P/D	Sharon Gluck Potts	7101 E. Troon Circle	Miami Lakes, FL 33014

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: _____ December 27, 2000 (305) 821-4823
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #