PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
08 FEB 22 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717471

1. Corporation Name
600 Michigan Condominium, Inc.

**REINSTATEMENT** 86-08
CR2E081 (12/07)

| 2. Principal Office Address - No P.O. Box # | | 3. Mailing Office Address | |
|---|---|---|---|
| 600 Michigan Avenue | | 7900 NW 155th Street | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. Suite 205 | |
| City & State Miami Beach, FL | | City & State Miami Lakes, FL | |
| Zip 33139 | Country US | Zip 33016 | Country US |

4. Date Incorporated or Qualified To Do Business in Florida 10/30/1969

5. FEI Number ☐ 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: Gabriel Alespeiti

Street Address (P.O. Box Number is Not Acceptable): 1007 6th Street

Suite, Apt. #, Etc.: Apt. # 5

City: Miami Beach | State: FL | Zip Code: 33139

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Gabriel E. Alespeiti — Date: 2/14/08
REGISTERED AGENT MUST SIGN

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/aT/D | Daphne Alespeiti | 600 Michigan Avenue | Miami Beach, FL 33139 |
| T/S/D | Gabriel Alespeiti | 600 Michigan Avenue | Miami Beach, FL 33139 |
| D | Dora Martinez | 600 Michigan Avenue | Miami Beach, FL 33139 |
| V/aS/D | Daniel Tivet | 600 Michigan Avenue | Miami Beach, FL 33139 |
| | | 2/22 | |
| | | | |

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 contained in Chapter 119, 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: Gabriel E. Alespeiti — Gabriel Alespeiti — 2/14/08 — 954-894-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

# Florida Department of State

Division of Corporations
Public Access System

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## CORPORATION REINSTATEMENT

### 600 MICHIGAN CONDOMINIUM, INC.

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | $1,583.75 |

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