

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2010 MAR 22 AM 7:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717698

1. Corporation Name

NORTH MIAMI LITTLE LEAGUE, INC.

2. Principal Office Address - No P.O. Box #

1355 NW 135 STREET

Suite, Apt. #, etc.

City & State

NORTH MIAMI, FLORIDA

Zip

33157

Country

USA

3. Mailing Office Address

P.O. BOX 681479

Suite, Apt. #, etc.

City & State

NORTH MIAMI, FLORIDA

Zip

33168

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

DECEMBER 9, 1969

5. FEI Number

23-7066532

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

GLENN Q. GEORGE, SR.

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

2601 N.W. 111 STREET

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33167

☒ 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.

REINSTATEMENT

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

Glenn Q. George, Sr.

REGISTERED AGENT MUST SIGN

Date 3/19/10

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
Pres.	Glenn Q. George, Sr.	2601 N.W. 111th Street	Miami, Florida 33167
V.P.	Andrew Wilcox	1695 N.W. 127th Street	Miami, Florida 33167
Sec.	Cheré Herring	19745 N.W. 32nd Court	Miami, Florida 33056
Treas.	Lorenzo Howard	1835 N.W. 117th Road	North Miami, Florida 33181

10. E-mail Address: gggeorgenupe4@yahoo.com

(To be used for future annual report notification)

11. 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. I further certify, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenn Q. George, Sr.

GLENN Q. GEORGE, SR.

3/19/10 305 338-0122

Date Phone #

B. Mitchell

MAR 22 2010