PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 23 AM 11:22

DOCUMENT # F02000002352

1. Corporation Name

TIGER NATURAL GAS, INC.

REINSTATEMENT 05-11

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
1422 EAST 71ST		1422 EAST 71ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
SUITE J		SUITE J	
City & State		City & State	
TULSA, OK		TULSA, OK	
Zip	Country	Zip	Country
74136	USA	74136	USA

4. Date Incorporated or Qualified To Do Business in Florida 05/13/2002

5. FEI Number 711382603 ☐ 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: C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.:

City: PLANTATION | State: FL | Zip Code: 33324

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: Connie Bryan — REGISTERED AGENT MUST SIGN — Date: 8/24/11

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
Director	LORI JOHNSON NALLEY	1422 E 71st St Ste J	Tulsa OK 74136
Pres.	LORI JOHNSON NALLEY	1422 E 71st St Ste J	Tulsa OK 74136
Treas.	DEBORAH SMITH	1422 E 71st St Ste J	Tulsa OK 74136
Secy.	DEBORAH SMITH	1422 E 71st St Ste J	Tulsa OK 74136

10. **E-mail Address:** TWalker@tigernaturalgas.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., *and 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 8/17/11 Date — 918-491-6998 Daytime Phone #

FL018 - 01/19/2011 | C T System Online

Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT
TIGER NATURAL GAS, INC.

Certificate of Status	**0**
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