

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F03000001243**

1. Corporation Name

Express One International, Inc

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

4250 Execuair ST

Suite, Apt. #, etc

3. Mailing Office Address

4250 Execuair ST

Suite, Apt. #, etc

City & State

Orlando FL

City & State

Orlando FL

Zip

32827

Country

USA

Zip

32827

Country

USA

7. Name and Address of Current Registered Agent

Name

Ronald W. Gray

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

4250 EXECUAIR ST

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32827

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 **5-10-11**

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
Pres	Keith M. Owens	4250 Execuair ST	Orlando, FL 32827
Sec	Ronald W. Gray	4250 Execuair ST	Orlando, FL 32827
V.P.	Stanley Helton	4250 Execuair ST	Orlando, FL 32827

10. E-mail Address: **Keith.Owens@FlyExpressOne.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

Date **5/10/11**

Daytime Phone # **407-301-6896**

FILED
11 MAY 10 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

CR2E081 (11/10)

07-11

4. Date Incorporated or Qualified To Do Business in Florida

03-10-2003

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

☒ Additional Fee required for a Certificate of Status

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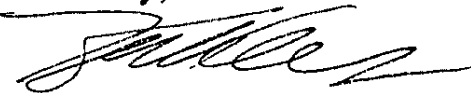
05/04/11--01046--009 **1350.00

05/10/2011

To Department of State,

I Keith M. Owens President of Express One International, Inc. Document # P09000072950 am releasing the name Express One International, Inc. and have no intention of revoking the dissolution of Express One International, Inc. Document # P09000072950.

Sincerely,

A handwritten signature in black ink, appearing to read 'Keith M. Owens', with a stylized flourish at the end.

Keith M Owens
President
Express One International, Inc