FILED
15 JAN 30 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

CR2E081 (11/10)

DOCUMENT # F07000000239

1. Corporation Name
Jones & Jones Inc. of Georgia

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
110 East Ninth Street	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tifton	City & State: Georgia
Zip: 31794 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 01/12/2007

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: CT 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: _____ Jordan Brown, Assistant Secretary, CT Corporation System Date: 01/30/2015

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Jonathan E. Jones	1228 Baytree Drive	Tifton, GA 31793
VP	Jeremy B. Jones	1221 Dearing Drive	Tifton, GA 31793
Sec	Vickie Whitely	215 Bethlehem Church Rd	Ocilla, GA 31774

10. E-mail Address: _____
(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: Jonathan E. Jones 1/30/15 (229) 382-6300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Division of Corporations

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT
JONES & JONES, INC. OF GEORGIA

Certificate of Status	0
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