PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2007 FEB 23 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F07864

1. Corporation Name

J. Kennedy and Associates, Inc.

000089719050
03/01/07--01002--013 **600.00

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
570 Colonial Park Dr.	570 Colonial Park Dr.
Suite, Apt. #, etc.: Suite 305	Suite, Apt. #, etc.: Suite 305
City & State: Roswell, Georgia	City & State: Roswell, Georgia
Zip: 30075 Country: USA	Zip: 30075 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/04/1980

5. FEI Number: 592048136 ☐ 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: Gary Marlin

Street Address (P.O. Box Number is Not Acceptable): 250 Catalonia Ave.

Suite, Apt. #, Etc.: Suite 303

City: Coral Gables State: FL Zip Code: 33134

☒ 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 617.0503, F.S.

Signature of Registered Agent _____ Date 2-22-07

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/T	Stephen J. Baron	570 Colonial Park Dr., Suite 305	Roswell, GA 30075
V/S	Lane Kollen	570 Colonial Park, Dr., Suite 305	Roswell, GA 30075
		B 2/26/07	
		REINSTATEMENT 04-07	

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: Stephen G. Baron STEPHEN J. BARON 2/21/07 770-992-2027

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