

CORPORATION  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS2020 MAY -5 AM 8:40  
CALLAHAN, JILL  
TALLAHASSEE, FLORIDA

DOCUMENT # F11000002353

1. Corporation Name

The 86 Company

CR2E081 (11/10)

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

850 Dixie Highway

3. Mailing Office Address

850 Dixie Highway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

6/6/2011

City &amp; State

Louisville, Kentucky

City &amp; State

Louisville, Kentucky

Zip

40210

Country

USA

Zip

40210

Country

USA

5. FEI Number

27-2386996

Applied For

Not Applied

6. CERTIFICATE OF STATUS DESIRED

\$0.76 Additional Fee req.  
for a Certificate of Sta

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  
FLZip Code  
33324

000344425410

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

James M. Halpin

Assistant Secretary

REGISTERED AGENT MUST SIGN

Date 01/24/20

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/D	Sue Perram	850 Dixie Highway	Louisville, Kentucky 40210
S/D	Jaileah X. Huddleston	850 Dixie Highway	Louisville, Kentucky 40210
D	John Higgins	850 Dixie Highway	Louisville, Kentucky 40210

10. E-mail Address: jill\_jackson@b-f.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. 617.155, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-20 502-724-74  
Date Daytime Phone

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

1

Date: 5/5/2020  
Acc#I20160000072

*en: c SW*

Name:	THE 86 COMPANY
Document #:	
Order #:	12595147

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

2020 MAY -5 AM 8:40  
TALLAHASSEE, FL  
ORDG

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

THIS IS A 1 - 2  
FILNG PER THE  
REJECTION  
LETTER. PLEASE  
FILE THE  
REINSTATEMENT  
PRIOR TO  
AMENDMENT.

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ (up to) \$ 1258.75

*\$91.25 + 8.75*

*Please call for  
authorization if you*

**Thank you!**

*need.*

PLEASE CALL IF A  
DIFFERENT  
AMOUNT IS  
NEEDED FOR THE  
REINSTATEMENT.

MAY 08 2020



May 1, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

THE 86 COMPANY  
154 GRAND ST  
NEW YORK, NY 10013

SUBJECT: THE 86 COMPANY  
REF: F11000002353

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

In order to amend, the entity must be Active on our records. You will need to obtain a paper Reinstatement form and mail in the documents as "File 1st" and "File 2nd", in order to properly file the documents.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder  
Regulatory Specialist III

FAX Aud. #: H20000043948  
Letter Number: 520A00009014