PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 APR 30 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F40168

1. Corporation Name

SANDPIPER INTERIORS INC

2. Principal Office Address	3. Mailing Office Address
6501 HABERSHAM ST	6501 HABERSHAM ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
APT 19	APT 19
City & State	City & State
SAVANNAH, GEORGIA	SAVANNAH, GEORGIA
Zip / Country	Zip / Country
31405 / USA	31405 / USA

4. Date Incorporated or Qualified To Do Business in Florida 6/1/81

5. FEI Number 59-2116264 ☐ 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: Lewis Sowell Jr

000004242380--6
-05/17/01--01076--018
****900.00 ****900.00

Street Address (P.O. Box Number is Not Acceptable): c/o Sandpiper Interiors 3512 S. Dixie Hwy

Suite, Apt. #, Etc.:

City: West Palm Beach, Fla State: FL Zip Code: 33405

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: Lewis Sowell Jr (REGISTERED AGENT MUST SIGN) Date: 2/23/01

CR2E081 (9/99)

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	LEWIS SOWELL	6501 HARBERSHAM ST #19	SAVANNAH- GA 31405
	REINSTATEMENT 00-01,188		

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 under section 119.07(3)(i), 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: Lewis Sowell Jr — President — 2/23/01 — 912-691-0973
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STF FL32524F.1

Page 2 of 2

Karp, Ronning, Arkin & Tindol
Certified Public Accountants, A Professional Corporation

123 Abercorn Street
Post Office Box 9547
Savannah, Georgia 31412
912-232-0475
fax 912-232-0478
kra@kracpa.com

Martin L. Karp, CPA
Dennis W. Ronning, CPA
Steven M. Arkin, CPA
Richard D. Tindol, CPA
Bradley A. Lucas, CPA
A.L. Karp (1925-1969)

March 1, 2001

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

We would like to request a waver of reinstatement fees for Sandpiper Interiors, Inc (Federal Identification Number 59-2116264). At the time that this report was due the taxpayer was involved in the care of a terminally ill relative and was also in the process of relocating. We would appreciate your consideration in this matter.

Sincerely,

Terry Bishop

Terry Bishop
Bookkeeper
Karp, Ronning & Tindol, PC
912-232-0475