

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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				;	Secretar	y of Sta	ate	STATE								
JMENT ation Name	# F	703	10)		3.1	41.1.7.11									
Upsala Florida Corporation																
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2. Principal Office Address					3. Mailing Office Address						SIA	ME	N	1 00	, -01	3
4764 Shorecrest Dr					4764 Shorecrest Dr						y 6. ,	fi (magaatam)				المستجار
Suite, Apt. #, etc.					Suite, Apt. #, etc.											7
											4- Date Incorporated or Qualified To Do Business in Florida 03/09/8					
City & State										5. FEI Number Applied For						1
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Street Address (P.O. Box Number is Not Acceptable)												•				
City										State Zin Code						
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Signature of												والمالية	_			081
Agent	GISTERED AC	SIGN					Date	191410	<u>ے</u>			- CR2				
and Street A	ddresses	of Each Office	er and	or Director (Fl	orida nonnro	ofit corpora	ations mu	ist list at le	east 3	directors)			_			1
		Name of			Street Address of Eacl											1
	Officer	rs and/or Dire	Officer and/or Direct					or City / State				<u> </u>		4		
John	<u> </u>	4764 Shorecrest					<u>-</u>	ONO	undo, FL		3781	7	1			
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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 filling 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date																
	STATEM JMENT ation Name PSOLO Aboreo Shoreo H, etc. Street Ado Street Ado Tohn Agne Agne Agne Agne Tohn Agne Tohn Agne Tohn Agne Tohn Tohn Agne Tohn To	ation Name LPSQ1Q F In A Office Address Shorecrest #, etc. Countr Street Address (P.C. 4764 Suite, Apt. #, Etc. City OMQ appointed the register Agnes E I Tohn Scot Ture:	STATEMENT JMENT # F 703 ation Name LPSQ1a Florida at Office Address Shorecrest Dr #, etc. Country Street Address (P.O. Box Number H764 Shore Suite, Apt. #, Etc. City Orlando appointed the registered agent of the fagnes Elizabeth Tohn Scott Name Agnes Elizabeth Agnes Elizabeth Tohn Scott Nach Agnes Elizabeth Tohn Scott Nach Agnes Elizabeth Tohn Scott Nach Turre: Litter: Litte	STATEMENT JMENT # F 7031 Continued at the statement application, the reason for disson that I am an officer or director or the recent of the statement application, the reason for disson the statement application, the reason for disson the statement application, the reason for disson the statement application have been paid and the reason the statement application is true and accurate, and my statement.	STATEMENT JMENT # F 70310 ation Name Upsala Florida Corporation at Office Address Shorecrest Dr 47645 #, etc. City & State Odo, Florida Orlan Country Zip A USA 3281 7. N Name John Scott Nadd Street Address (P.O. Box Number is Not Acceptable) 4764 Shorecrest D Suite, Apt. #, Etc. City Orlando appointed the registered agent of the above named corporation for Directors John Scott Nadd Agnes Elizabeth Nadd Tohn Scott Nadd Agnes Elizabeth Nadd	SECRETARIENT SECRETARIENT SECRETARIENT SECRETARIENT SECRETARIENT SITURE: SECRETARIENT SECRETARIENT SECRETARIENT SECRETARIENT SECRETARIENT SECRETARIENT SUIVISION OF CO DIVISION OF CO SUIVISION OF CO SUIVISION OF CO SUIVISION OF CO A Mailing Office Addres 4764 Shore 4764 Shore 4764 Shore 4764 Shore Suite, Apt. #, etc. City & State Country To BUSA Street Address SUITER APT To Name and A Name To Name of Officers and/or Director (Florida nonpro Name of Officers and/or Directors Tohn Scoth Nadd 4764 Agnes Elizabeth Nadd 4764 Agnes Elizabeth Nadd Tohn Scoth Nadd Tohn Scoth Nadd Toth Scoth Nadd T	SECRETARY OF SECRE	SECRETARY of State DIVISION OF CORPORATIONS JMENT # F 70210 alon Name Upsala Florida Corporation al Office Address 3. Mailing Office Address 4764 Shorecrest Dr 5. Suite, Apt. #, etc. City & State OMando Florida Country 17 & USA 7. Name and Address of Curren Name John Scott Nadd Street Address (P.O. Box Number is Not Acceptable) 4764 Shorecrest Dr Suite, Apt. #, Etc. City Orlando appointed the registered agent of the above named corporation, am familiar with and acceptable Agent REGISTERED AGENT MUST SIGN and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must be addressed Agent Addresses of Each Officer and/or Director (Florida nonprofit corporations must be addressed Agent Addresses of Each Officer and/or Director (Florida nonprofit corporations must be addressed Agent Nadd 4764 Shorecress Tohn Scott Nadd 4764 Shorecress Agnes Elizabeth Nadd 4764 Shorecress Tohn Scott Nadd 4764 Shorecress Agnes Elizabeth Nadd 4764 Shorecress Ture: 1 La	SECRETARY OF State DIVISION OF CORPORATIONS JMENT # F 70310 all Office Address all Office Address 3. Mailing Office Address 4. The Shorecrest Dr 4. etc. City & State Country 3. 28.7 USA 7. Name and Address of Current Register Name 7. Name and Address of Current Register Name 7. Name and Address of Current Register Name 8. Suite, Apt. #, Etc. City Orlando 1. Appointed the registered agent of the above named corporation, am familiar with and accept the conficers and/or Directors Agent 1. REGISTERED AGENT MUST SIGN 1. Name of Officers and/or Director (Florida nonprofit corporations must list at the Conficers and/or Directors 1. Apprec Elizabeth Nadd 4764 Shorecrest 4764 Shorecrest	STATEMENT Secretary of State DIVISION OF CORPORATIONS JMENT # F 70010 Sition Name Upscala Florida Corporation al Office Address Shorecrest Dr 4764 Shorecrest Dr #, etc. City & State City & State Orlando Florida Country To BUSA T. Name and Address of Current Registered A Street Address (P.O. Box Number is Not Acceptable) 4764 Shore Crest Dr Suite, Apt. #, Etc. 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Data Incorporate or TO DO Business in FI City & State City & State City & State To Do Business in FI SET Number TO DO Business TO DO Business	STATEMENT DIVISION OF CORPORATIONS SECRETARY OF STALL AHASSEE FLO JIMENT # F 70210 JIMENT # F 7021	STATEMENT DIVISION OF CORPORATIONS DIVISIO	STATEMENT Secretary of State DIVISION OF CORPORATIONS SECRETARY OF STATE ALL AHASSEE FLORIDA JUNEAN # F 70 21 0 SIGN Name UpScale Florida Corporation ATOMIC Address And Office Address And Office Address And Office Address And Date Incorporate or Qualified To be described in Product or State Country A Date Incorporate or Qualified To be described in Product or State Country A Date Incorporate or Qualified To be described in Product or State Secretary of State A Date Incorporate or Qualified To be described in Product or State Country A Date Incorporate or Qualified To be described in Product or State Country A Date Incorporate or Qualified To be described in Product or State Secretary of State A Date Incorporate or Qualified To be described in Product or State Secretary of Croporation A Date Incorporate or Qualified To be described in Product or State Country To Country A Date Incorporate or Qualified To be described in Product or State To Country To Country To USA To USA To Name and Address or of Current Registered Agent To Country State Address or Product or State To Country State Address or Product or State To Country To Country To USA To Country To Country To USA To Country To Country To Country To USA To Country To Country To Country To Country To Country To USA To Country To Coun	STATEMENT STATEMENT STATEMENT JAMENT # F 70010 JAMENT # F 7001