PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS 98 MAY 15 PM 3: 28 DOCUMENT # F96000 SECRETARY OF STATE TALLAHASSEE, FLORIDA American Eagle Garage - Ft. Meyers, Inc. Mailing Address Principal Place of Business 1845 Meriden-Waterbury Rd. 1845 Meriden-Waterbury Rd. Milldale, CI 06467 Milldale, CT 06467 **400002530414--4** -05/20/98--01093--003 ****900.00 ****900.00 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3 New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable March 15, 1996 Suite, Apt. #, ctc. Suite, Apt. #, etc. 5. FEI Number Applied For 06-1448264 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Zip Country Zin CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip Title(s) and/or Directors Pres. Dir. Ted J. Crew 80 Knollwood Drive Avon, CT 06001 Michael A. Ouimet 60 Cope Farms Road Farmington, CT 06032 E. HARTEDRO CT OWOS 66 BODWELL RO 5ec REINSTATEME 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Age: Name CT Corporation System c/o CI Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Plantation, FL 33324 Suite, Apt. #, Etc. City State Zip Code 10. I, being appointed the replication agent of the attention amed comporation am familiar with and accept the obligations of Section 607.0505, F.S SALVINA AMENTA-GRAY Signature of Registered Age MOUTG - C HEGISTERED AGENT Does this corporation pay any intangible tax to the (See other side for information on intangible tax.) Dept. of Revenue under S. 199.032, Florida Statutes. Yes 12. ‡ 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. Kichard D. M. Carthy
signing officer or director