PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

REINSTATEMENT DOCUMENT # F980000918 1. Corporation Name RJM Communications, Inc. 2. Principal Office Address Same Subst. Apt #, etc. 2. Principal Office Address Same Subst. Apt #, etc. Subst. Apt #, etc. City & State Kalarmazoo, MI Zip Country 49001 Ralarmazoo 7. Name and Address of Current Registered Agent Name Warrent Coarn Steed Address (P.O. Box Number is Nick Accoptable) 4000	* 14-1-1-1	•	-					
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2. Principal Office Address 1218 S. Park Street Suite, Apt. 4, etc. Suite, Apt. 5, etc. Suite, Apt. 6, etc. Suite, Apt. 6, etc. Suite, Apt. 6, etc. 4. Dute Incorporated or Qualified 12/21/98 Kalamazoo, MI Zip Country 49001 Kalamazoo 7. Name and Address of Current Registered Agent Name Rarron Ocen Street Address (P. Diso Number is Not Acceptable) 4000 Ref. I being appointed the registered Agent Registered Agent Signature of Registered Agent Registered Agent Resistered Agent R	Towns, Trompy			718	00006	F9800		I .
2. Principal Office Address 1218 S. Park Street Suite, Apt. 8, etc. Suite, Apt. 8, etc. Suite, Apt. 8, etc. Suite, Apt. 8, etc. 4. Date Incorporated or Qualified To De Business in Proficial 12/21/98 Kalamazco, MI Zip Country 49001 Kalamazco 7. Name and Address of Current Registered Agent Name Rattron Oxen Street Address (P.O. Box Number is Not Acceptable) 4000 Ref. I being appointed the registered Agent Registered Agent Suite, Apt. 8, etc. City Naples 8. I, being appointed the registered Agent Registered Agent Registered Agent Signature of Registered Agent Resistered Agent Registered Agent Resistered Agent Registered Agent Signature of Registered Agent Resistered Agent Registered Agen					s. Inc.	mmunication	RJM Con	Í
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City & State Kalamazoo, MI Zip Country 49001 Country Kalamazoo 7. Name and Address of Current Registered Agent Name Warren Owen Street Address (P.O. Box Number is Not Acceptable) 4000 Reflection Countr Suite, Apt #, Etc. City Naples 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section Registered Agent Registered	The state of the s	4. Data leasurement of a Countity of	4 Coto I		Suite, Apt. #, etc.		#, etc.	Suite, Apt.
State Stat	12/21/98			<u></u>	07.00			
Agent Country State Address of Current Registered Agent Name Warren Owen			5. FEI N	ļ ·		,		1
To. Name and Address of Current Registered Agent Name	Not Applicable			Country	Zip	Intro		
Name Warren Owen	\$8.75 Additional Fee required for a Certificate of Status	CERTIFICATE OF STATUS DESIDED TO COME		Country			l l	
Name Warren Owen Street Address (P.O. Box Number is Not Acceptable) 4000 SReflection Court Suite, Apt. #, Etc. City Naples 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section Registered Agent 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 Officers and/or Directors Officers and/or Directors Pres, Rickman J. Mörrison, Sr. 1218 S. Park Street Kalamazoo, MI 4900 10. Lecritly that I am an officer or director or the receiver or trustee empowared to execute this application as provided for in chapter 607 or 617, F.S. Liurther certify that withis reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to re 17 names so the corporate name satisfies the requirements of section 607 fold to refer names and corporate name satisfies the requirements of section 607 fold to refer names and corporate names satisfies the requirements of section 607 fold to refer names and corporate names satisfies the requirements of section 607 fold to refer names and corporate names satisfies the requirements of section for th		d Agent	egistered Agent	d Address of Current	7. Name and			<u> </u>
Pres, Rickman J. Morrison, Sr. 1218 S. Park Street Kalamazoo, MI 4900 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 with this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607 0401 or 617 0401 o	_	ations of section 607.0505 or 617.0503, F.S. Date <u>May 3, 2003</u>		ST SIGN	e named corporation, am	P.O. Box Number is No. Reflection Cles tered agent of the above	Street Address (P. 4000 Suite, Apt. #, Etc. City Napl appointed the register	Signature of Registered A
Pres, Rickman J. Mörrison, Sr. 1218 S. Park Street Kalamazoo, MI 4900 Director 10. certify that 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. further certify that withis reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607 0401 or 617	State / Zip		of Each	Street Addres		Name of	 -	
Director 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 withis 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								Pres.
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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. than			,					
on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	7.0401, F.S., that all fees 8. The information indicated 	he requirements of section 607.0401 or 617.0401 n exemption under section 119.07(3)(i), F.S. The i oath. April 24, 2003 (269)	satisfies the requirem lify for an exemption te under oath.	ed, the corporate name s on this form do not qu me legal effect as if ma	polition has been eliminate names of individuals listed gnature shall have the sai	on, the reason for disso we been paid and the n accurate, and my sig	istatement application y the corporation have application is true and	this rein owed by on this a