

# 2016 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED  
AND  
FILED

16 FEB 12 AM 8:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02122016 REIN-P CR2E098 (12/11)

DOCUMENT # F98000007082	
1. Entity Name WJLN HOLDINGS, INC.	



Principal Place of Business 1512 CHINA GROVE TRAIL TALLAHASSEE, FL 32301-4972 US	Mailing Address 1512 CHINA GROVE TRAIL TALLAHASSEE, FL 32301-4972 US
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2. Principal Place of Business - No P.O. Box # 1508 A China Grove Tr	3. Mailing Address 1508 A China Grove Tr
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Tallahassee FL	City & State Tallahassee FL
Zip 32301	Zip 32301
Country	Country

4. FEI Number 65-0884283	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RYDER, LISE A 1512 CHINA GROVE TRAIL TALLAHASSEE, FL 32301-4972	7. Name and Address of New Registered Agent Name: Ryder, Lise A Street Address (P.O. Box Number is Not Acceptable): 1508 A China Grove Tr. City: Tallahassee FL Zip Code: 32301
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lise A Ryder DATE: 2/12/16

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$750.00 After January 1, 2017, Fee will be \$900.00
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RYDER, WILLIAM 1508 CHINA GROVE TRAIL TALLAHASSEE, FL 323014972 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS RYDER, JEANNE 1508 CHINA GROVE TRAIL TALLAHASSEE, FL 323014972 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV RYDER, NEIL P 1500 CHINA GROVE TR TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RYDER, JEFF W DR. 3433 MCNARY PKWY LAKE OSWEGO, OR 97035 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPTD RYDER, LISE A 1512 CHINA GROVE TRAIL TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lise A. Ryder DATE: 2/12/16 E-MAIL ADDRESS: lrqueenie99@gmail.com

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

lrqueenie99@gmail.com