

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAR 13 PM 3:49

DOCUMENT # PA00000000385

1. Corporation Name

Nature's Trading Company, Inc.

2. Principal Office Address

Flat Iron Bldg, Ste 818

Suite, Apt. #, etc.

20 Battery Park Ave.

City & State

Asheville, NC

Zip

Country

28801

USA

3. Mailing Office Address

c/o Carol King & Assoc.

Suite, Apt. #, etc.

40 N. French Broad Ave.

City & State

Asheville, NC 28801

Zip

Country

28801

USA

REINSTATEMENT

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**4. Date Incorporated or Qualified
To Do Business in Florida**

12/10/99

5. FEI Number

54-1692420

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

Sherry Partlow

Street Address (P.O. Box Number is Not Acceptable)

1901 Highway A1A, Suite 4B

Suite, Apt. #, Etc.

City

Indian Harbour Beach

State

FL

Zip Code

32937

600003856686

03/16/01--01100--033

****900.00 ****900.00

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

Sherry Partlow

REGISTERED AGENT MUST SIGN

Date

Feb 20, 2001

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	Holly Berry	Flat Iron Bldg, Ste 818 20 Battery Park Ave.	Asheville, NC 28801
VP	Sherry Partlow	1901 Hwy A1A, Ste 4B	Indian Harbour Beach, FL, 32937
Sec	Same as VP		
Treas	Same as President		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sherry Partlow

Date

Feb 20, 2001

Daytime Phone #

CR2E081 (9/99)