PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 MAR -6 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G-03554

1. Corporation Name

SUNSHINE PROPERTIES INTERNATIONAL, INC.

2. Principal Office Address		**3.** Mailing Office Address	
104 E. Nine Mile Road		P. O. Box 15674	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Pensacola, FL 32534		Pensacola, FL 32514	
Zip	Country	Zip	Country
32534	USA	32514	USA

4. Date Incorporated or Qualified To Do Business in Florida OCTOBER-7-82

5. FEI Number 59-2228136 ☐ 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: Frances S. Weiner

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-03/14/02--01060--029
****8.75 ****8.75

Street Address (P.O. Box Number is Not Acceptable): 104 E. Nine Mile Road

Suite, Apt. #, Etc.:

City	State	Zip Code
Pensacola	FL	32534

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: Frances S. Weiner Date: 3/5/2002
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
P	JOSEPH F. MORGAN	4475 Mobile Hwy.	Pensacola, FL 32506
S	RHONDA BRETHORST	1305 W. Buchanan, Apt A-11J	California, MO 65018
T	JOSEPH F. MORGAN	4475 Mobile Hwy.	Pensacola, FL 32506

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: Joseph F. Morgan JOSEPH F. MORGAN 3-5-02 850-458-1366
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #