

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



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

00 AUG -7 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

G43245

1. Corporation Name

Diesel Specialists, Inc.

2. Principal Office Address

390 N. Orange Ave.
Suite, Apt. #, etc. Suite 2700
Bank of America Center
City & State
Orlando, Florida

Zip Country
32801-1673 Orange

3. Mailing Office Address

390 N. Orange Ave.
Suite, Apt. #, etc. Suite 2700
Bank of America Center
City & State
Orlando, Florida

Zip Country
32801-1673 Orange

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

6-10-1983

5. FEI Number

59-2294865

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

Bernard H. Dempsey, Jr., Esquire

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

390 N. Orange Ave.

Suite, Apt. #, Etc.

Bank of America Center, Suite 2700

City

Orlando

State

FL

Zip Code

32801-1673

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

Bernard H. Dempsey, Jr.
REGISTERED AGENT MUST SIGN

Date

7/24/00

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
PD	Don Lincoln	6111 Linneal Beach Dr.	Apopka, FL 32703
ST	Boriboon Lincoln	6111 Linneal Beach Dr.	Apopka, FL 32703
V	James Lincoln	2420 Piedmont Lakes Blvd.	Apopka, FL 32703
D	Kurtis Lincoln	6111 Linneal Beach Dr.	Apopka, FL 32703

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 taxes 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:

Don F. Lincoln Don F. Lincoln
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/31/00

Daytime Phone #

CR2E081 (9/99)