PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUN 16 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G48670

1. Corporation Name
Thornton & Rothman, P.A.

200 South Biscayne Boulevard
200 South Biscayne Boulevard

REINSTATEMENT 63-84

2. Principal Office Address		**3.** Mailing Office Address	
200 South Biscayne Boulevard		200 South Biscayne Boulevard	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 2690		2690	
City & State		City & State	
Miami, Florida		Miami, Florida	
Zip	Country	Zip	Country
33131	United States	33131	United States

4. Date Incorporated or Qualified To Do Business in Florida 07/07/1983

5. FEI Number 59-2302914 ☐ 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
David Rothman

100038020211
06/16/04--01055--004 **300.00

Street Address (P.O. Box Number is Not Acceptable)
200 South Biscayne Boulevard

Suite, Apt. #, Etc.
Suite 2690

100038020211
06/16/04--01055--005 **8.75

City
Miami

State
FL

Zip Code
33131

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 _____ Date June 15, 2004
REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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/D	John W. Thornton, Jr.	200 S. Biscayne Blvd., Suite 2690	Miami, Florida 33131
V/D	David Rothman	200 S. Biscayne Blvd., Suite 2690	Miami, Florida 33131

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: _____ David Rothman June 15, 2004 (305) 358-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #