PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 AUG 15 8:18

DOCUMENT # G56547

1. Corporation Name
LANCE BENEFIELD & COMPANY, INC.

REINSTATEMENT 01-05

2. Principal Office Address		**3.** Mailing Office Address	
501 Santa Monica Blvd.		501 Santa Monica Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 600		Suite 600	
City & State		City & State	
Santa Monica, CA		Santa Monica, CA	
Zip	Country	Zip	Country
90401	Santa Monica Co.	90401	Santa Monica Co.

4. Date Incorporated or Qualified To Do Business in Florida 8/24/1983

5. FEI Number 59-2448096 ☐ 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: Lance G. Hanish

Street Address (P.O. Box Number is Not Acceptable): 20330 Ardore Lane

Suite, Apt. #, Etc.:

City: Estero | State: FL | Zip Code: 33928

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 [signature] REGISTERED AGENT MUST SIGN Date 7/12/05

CR2E081 (01/05)

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/T/D	Lance G. Hanish	501 Santa Monica Blvd.; #600	Santa Monica, CA 90401
S/V/D	Ellen F. Hanish	501 Santa Monica Blvd.; #600	Santa Monica, CA 90401
		100058741841 08/18/05--01053--010 **1200.00	

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] Lance G. Hanish, President 7-12-05 310-656-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

B. Mitchell AUG 17 2005