۰., F	LEASE READ	ALL INSTRUC	TIONS BEFORE		THIS FORM	
APPLICATIO	NC NC	Kathe	ARTMENT OF STATE erine Harris		and the second sec	Yaya
REINSTATEM		Secretary of State				
DOCUMENT 1. Corporation Name Scott-	40 Grant (154	12		FILED 99 JAN IO AM 9: SECRETARY OF STA ALLAHASSEE, FLORI	ΤΕ ΦΔ
Principal Place of Business	;	-	,	.1		
	IAIN STRE ILLE, FL					,
If above addresses are inc 2. New Principal Office Add		ough incorrect information 3. New Mailing Office /	and enter correction below. Address, If Applicable	4. Date Incorporated	or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		To Do Business in Florida 5-01-84		
City & State		City & State		5. FEI Number Applied For 59-2422009 Not Applicable		
Zip	Country	Zip	Country	6. CERTIFICATE OF ST	- Billes al	
7. Names and Street Addre	esses of Each Officer and/	or Director (Florida nonpr	rofit corporations must list at lea	ast 3 directors)		
Title(s)	Name of Officers Street Address of Each Title(s) and/or Directors Officer and/or Director 2 3 (Do NOT Use Post Office Box N				City / State / Zip)
PISIT C. Fre	derick Thom	450N, II 104	N. MAIN ST.,	, STE 300 GI	DD309395	11
hein	SIAIEWI	<u>99</u>				**750.00
			15		·••	÷ ÷
			1/11/2008		—	
8. Name #	and Address of Current F	legistered Agent		9. Name and Addres	s of New Registered Agent	······
C. Frederick Thompson, II				,	•	
	MAIN STREE		300 Street Address (F	P.O. Box Number is Not A	Acceptable)	·
	ILLE, FL 2					
U			City		State Zip C)ode
10. I, being appointed the r	egistered agent of the area	re named corporation, arr	n familiar with and accept the o	bligations of Section 607.		, ,· ·
Signature of Registered Agent	_UMU	GISTERED AGENT MUS	TSIGN	Dat	ate <u>1/06/20</u>	00
11. This corpora Intangible P	ation owes the Personal Proper		ne 30. Yes		(See other side for int on intangible ta	
this reinstatement applic owed by the corporation	cation, the reason for disso have been paid and the n	lution has been eliminated arges of individuals listed	to execute this application as p d, the corporate name satisfies on this form do not qualify for he legal effect as if made under	the requirements of sect an exemption under sect	tion 607.0401 or 617.0401, F.S	S., that all fees
			FFICER OR DIRECTOR	D	l - 6 - 2008 Date Daytime Pt	none #