850521 1010 SC [illegible] 155 P02 AUG 1[illegible] 10.[illegible]

APPLICATION FOR REINSTATEMENT

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

P75184

DOCUMENT # H75184

REINSTATEMENT 1996-99

FILED
99 OCT 18 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

Suncoast Fastener & Supply, Inc.

Principal Place of Business	Mailing Address
2200 51ST Street, Sarasota, FL 34234	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 9/9/85

5. FEI Number: 59-2570786 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ [illegible]

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	Richard J. Cacchiotti	2200 51ST Street	Sarasota, FL 34234
STD	Paul W. Bridgman	2200 51ST Street	Sarasota, FL 34234
			300003025713--0 -10/26/99--01074--015 ***1200.00 ***1200.00
			300003025713--0 -10/26/99--01074--016 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

Terry L. Armentrout
1727 2ND Street
Sarasota, FL 34236

9. Name and Address of New Registered Agent

Name: Troy H. Myers, Jr.
Street Address (P.O. Box Number is Not Acceptable): 2033 Main Street
Suite, Apt. #, Etc.: Suite #600
City: Sarasota | State: FL | Zip Code: 34237

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: [signature] REGISTERED AGENT MUST SIGN Date: 8/18/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. 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] 7/18/99 AUP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ACCOUNT NO. : 072100000032

REFERENCE : 417080 3487A

AUTHORIZATION :

COST LIMIT : $ PREPAID

ORDER DATE : October 18, 1999

ORDER TIME : 11:25 AM

ORDER NO. : 417080-015

CUSTOMER NO: 3487A

CUSTOMER: Troy Myers, Esq
Icard Merrill Cullis Timm
2033 Main Street, Suite 600
P. O. Drawer 4195
Sarasota, FL 34237

DOMESTIC FILINGS

NAME: SUN COAST FASTENER AND SUPPLY, INC.

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS _____