


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS 10 FEB -8 AM 10:31	
DOCUMENT # <u>H76550</u>					
1. Corporation Name <u>Jackleg Enterprises, Inc.</u>					
2. Principal Office Address - No P.O. Box # <u>230 S. Temple Ave.</u>		3. Mailing Office Address <u>P.O. Box 1120</u>		000168245670 02/08/10--01064--020 **458.75 CR2E081 (11/09)	
Suite, Apt. #, etc. _____		Suite, Apt. #, etc. _____			
City & State <u>Starke Florida</u>		City & State <u>Starke Florida</u>		4. Date Incorporated or Qualified To Do Business in Florida <u>9-18-1985</u>	
Zip <u>32091</u>	Country <u>US</u>	Zip <u>32091</u>	Country <u>US</u>	5. FEI Number <u>59-2595601</u>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Name and Address of Current Registered Agent				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
Name <u>Reddish, George Larry</u>				<input checked="" type="checkbox"/> The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
Street Address (P.O. Box Number is Not Acceptable) <u>17324 N.E. 120 Ave.</u>					
Suite, Apt. #, Etc. _____					
City <u>Waldo</u>		State <u>FL</u>	Zip Code <u>32694</u>		
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 <u>George Larry Reddish</u> Date <u>2-2-10</u> REGISTERED AGENT MUST SIGN					
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	
PT	Reddish, George Larry	17324 N.E. 120 Ave.		Waldo, FL 32694	
VS	Reddish, Helen Diane	17324 N.E. 120 Ave.		Waldo, FL 32694	
REINSTATEMENT 08-10 B 2/10/10					
10. E-mail Address: <u>Jacklegbbq@aol.com</u> (To be used for future annual report notification)					
11. 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. I further certify, 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: <u>George Larry Reddish</u> <u>George Larry Reddish</u> 2-2-10 904-964-8840 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					