PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 01 WUR

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 22 PM 3:45

DOCUMENT # H88354

1. Corporation Name

GALERIA DE ARTE NADER, INC.

Principal Place of Business	Mailing Address
3306 PONCE DE LEON BLVD. CORAL GABLES FL 33134 US	3306 PONCE DE LEON BLVD. CORAL GABLES FL 33134 US

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: 12/05/1985

5. FEI Number: 59-2605984 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

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	4 City / State / Zip
P	NADER, MARIA	ATARAZANA #9	SANTO DOMINGO FL
VP	NADER, GARY	3306 PONCE DE LEON BLVD.	CORAL GABLES FL 33134

400004669334--3
-11/06/01--01071--023
****150.00 ****150.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
NADER, GARY 3306 PONCE DE LEON BLVD. CORAL GABLES FL 33134	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (8/01)

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 REQUIRED Date 10/17/01
REGISTERED AGENT MUST SIGN

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 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.

305-442-0256

SIGNATURE: SIGNATURE REQUIRED Andy NADER 10/17/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Gary Nader *fine art*

The Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

To whom it may concern:

I hope this letter finds you well.

As per my conversations with Stacy at the Reinstatement division she has asked me to do the following.

RE: Document # H88354 (Galeria de Arte Nader, Inc.)

We never received prior notification on this document number until today. Thus we never sent in the check in the amount of $150.00. Enclosed please find the application received today along with check #2043 in the amount of $150.00.

RE: Document # POOOOOO44526 (Latin Fine Arts.Com Corp.)

We never received the forms regarding the correction that you needed (#5 – FEI Number). Enclosed please find the corrected form that was received today. You already have check # 1669 in the amount of $150.00 that was deposited back in April of this year.

If you have any questions please call 305-442-0256.

Thank you kindly,

10/17/11
Gary Nader

3306 Ponce de Leon Blvd, Coral Gables/Miami, Florida 33134 Tel: (305) 442-0256 Fax: (305) 443-9285
art@garynader.com www.garynader.com