

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 FEB -8 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #JO1357

1. Corporation Name

BKB Oceanfront Properties, Inc.

2. Principal Office Address

3209 S. ATLANTIC AVE.

Suite, Apt. #, etc.

3. Mailing Office Address

- Same -

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

City & State

Zip

32118

Country

Volusia

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2/27/86

5. FEI Number

59-2654699

Applied For

Not Applicable

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

SP

REINSTATEMENT 7-01

7. Name and Address of Current Registered Agent

Name

DAVID A. ZILL, Esq.

500003746815--9

Street Address (P.O. Box Number is Not Acceptable)

4393 RIDGEWOOD AVE. SUITE 1

-02/22/01--01012--008

***1350.00 ***1350.00

Suite, Apt. #, Etc.

City

PORT ORANGE

State

FL

Zip Code

32127

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

David A Zill

Date 1/31/2001

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
P, V, D	YUSUF LORI	3209 S. ATLANTIC AVE	DAYTONA BEACH FL 32118
S, T	ALAN BAERENKLAW	3209 S. ATLANTIC AVE.	DAYTONA BEACH, FL 32118
			500003746815--9
			-02/22/01--01012--009
			***150.00 ***150.00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/31/2001

Daytime Phone #

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

*** Attachment ***

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT #			
1. Corporation Name BKB Oceanfront Properties, Inc.			
2. Principal Office Address 3209 S. ATLANTIC AVE. Suite, Apt. #, etc.		3. Mailing Office Address - Same - Suite, Apt. #, etc.	
City & State Daytona Beach, FL		City & State	
Zip 32118	Country Volusia	Zip	Country
4. Date Incorporated or Qualified To Do Business in Florida 2/27/86		5. FEI Number 59-2654699	
6. CERTIFICATE OF STATUS DESIRED ☐		7. Name and Address of Current Registered Agent	
Name DAVID A. ZILL, ESQ. Street Address (P.O. Box Number is Not Acceptable) 4393 RIDGEWOOD AVE. SUITE 1 Suite, Apt. #, Etc. City PORT ORANGE State FL Zip Code 32127			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.			
Signature of Registered Agent: David A. Zill		Date: 1/31/2001	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, V, D	YUSUE LORI	3209 S. ATLANTIC AVE	DAYTONA BEACH, FL 32118
S, T	ALAN BAERENKLAW	3209 S. ATLANTIC AVE.	DAYTONA BEACH, FL 32118
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: 		Date: 1/31/2001	
SIGNATURE AND TYPE IN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Depute Phone	

CORP-001 (REV. 8/87)

David A. Zill, P.A.
Attorney at Law

4393 Ridgewood Avenue, Suite 1
Port Orange, Florida 32127

(904) 760-4630
Fax: (603) 687-7321
E-mail: dazmail@bigfoot.com

February 6, 2001

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

Re: Reinstatement of BKB Oceanfront Properties, Inc. and Globe Funding, L.C.

Dear Sir/Madam:

Enclosed please find originals and copies of applications for reinstatement of the above-named companies. Please file the originals of the applications with the Florida Secretary of State. Please date-stamp the copies, and return them in the enclosed self-addressed, stamped envelope to this office.

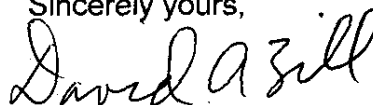
Also enclosed are the following checks:

\$400.00, for reinstatement of Globe Funding, L.C.;

\$1,350.00 and \$150.00, for a total of \$1,500.00, for reinstatement of BKB Oceanfront Properties, Inc.

Thank you for your assistance in this matter, and please contact me should you have any questions or if I may assist you further in this matter.

Sincerely yours,



David A. Zill