1 cg2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINSTATEMENT			Secr	RIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			FILED 05 NOV 18 PM 3:13				
DOCUMENT # J42938 1. Carporation Name						SECILLI - DI STATE TALLAHASSEE, FLORIDA					
LANDMARC BUSINESS SERVICES, INC.						EINSTATEMENT 02-05					
				Address / 40 STREET	10		CR2E081 (8/05)	<u> </u>			
Suite, Apt. #, etc. Suite,			Suite, Apt. #, etc.	ite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 11/19/1986				
1 · 3 ·			City & State DAVIE FI	City & State DAVIE FL		5. FEI Number Applied For Not Applicable					
^{Zip} 33331	Country		Zip 33331	US		6. CERTIFICATE	OF STATUS		Additional For a Certificate		
7. Name and Address of Current Registered Agent Name											
	Street Address (P.O. Box Number is Not Acceptable) 14984 SW 40 STREET Suite, Apt. #, Etc. City DAVIE State FL 333331										
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 Life Park Registered Agent REGISTERED AGENT MUST SIGN											
9. Names and Street Addresses of Each Officer and/or Director (Florida				da nonprofit corporations must list at least 3 directors) Street Address of Each			05/10/21/17				
Titles	Officers and/or Directors			Officer and/or Director			City / State / Zip				
P	JOHN WEAVER			14984 SW 40 STREET			DAVIE FL 33331				
VP .	ELIZABETH KING		14	14984 SW 40 STREET			DAVIE FL 33331				
						11/2	DDC 9/85-)61761 -0106800	840 3 **600	7.00	
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 Date Daytime Phone #											

242

LANDMARC BUSINESS SERVICES, INC. 14984 SW 40TH Street Davie, FL 33331 Tel (954) 732-6833

11-15-05

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: J42938

To Whom It May Concern:

It has just come to my attention that the above referenced corporation has been dissolved for not filing its Uniform Business Report.

The corporation's address had changed and I never received the renewal documents.

As such, I have downloaded a blank Reinstatement form which I have filled out with the corporation's updated information.

Being that I never received the renewal documents, I would like to request an abatement of penalties associated with the reinstatement of the company.

Thank you,

John Weaver

President