

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2009 AUG 14 A 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600159602916

08/14/09--01050--014 **3750.00
CR2E081 (12/08)

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J92549

1. Corporation Name

RDJ, Financial Services, Inc

2. Principal Office Address - No P.O. Box #

1311 Atlantic St

Suite, Apt. #, etc.

City & State

Melbourne FL

Zip

32951

Country

USA

3. Mailing Office Address

1311 Atlantic St

Suite, Apt. #, etc.

City & State

Melbourne FL

Zip

32951

Country

USA

4. Date Incorporation Qualified
To Do Business in Florida

9-16-87

5. FLL Number

59-2863810

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

12/08 Add to the fee

7. Name and Address of Current Registered Agent

Name

Jon Oden : Fisher Rushmer

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

20 North Orange AVE

Suite, Apt. #, Etc.

Suite 1500

City

Orlando

State

FL

Zip Code

32802

☐ 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.

8. I, having appointed the registered agent of the above named corporation, am bound with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date 8-13-09

REGISTERED AGENT MUST SIGN

9. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer, Director, or Director	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Dawn M Renne	9204 Hayden Hall	Charlotte NC 28269
SR VP	Steven Mendieta	2901 Providence Hill	Matthews, NC 28105
DIR	C.R.Lance	1311 Atlantic Street	MELBOURNE FL 32951
DIR	Jeanna Morris	23 Lake Side Drive	Pensacola FL 32507

REINSTATEMENT

10. I, the undersigned, being a duly qualified officer or director of the corporation, hereby certify that the information furnished on this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0501 or 617.0501, F.S., that all of the requirements of section 607.0505 or 617.0503, F.S., have been met, and that the corporation is now in compliance with the provisions of the Florida Statutes.

Signature of Officer or Director: [Signature]
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Dawn M Renne
Date: 704287-3434