PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 DEC 31 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K 05697

1. Corporation Name
RAINBOW SERVICES, INC. & JACKSONVILLE

Principal Place of Business
33590 BELVEDERE RD.
W. PALM BEACH, FL.
33406

Mailing Address
PO BOX 16605
W. PALM BEACH, FL.
33416

300002050263--6
-01/08/97--01042--001
****452.50 ****452.50

300002050263--6
-01/08/97--01042--002
****122.50 ****122.50
DO NOT WRITE ABOVE THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
— AS ABOVE
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Address, If Applicable
— AS ABOVE
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida
11-30-87

5. FEI Number
65-0038507
☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRES	JESSE LEE ANTWINE JR	13585 BARBERRY DR.	WELLINGTON, FL 33414
SECY	PHYLLIS J. ANTWINE	13585 BARBERRY DR.	WELLINGTON FL 33414

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent
Name
JESSE LEE ANTWINE, JR.
Street Address (P.O. Box Number is Not Acceptable)
13585 BARBERRY DR.
Suite, Apt. #, Etc.
City
WELLINGTON
State FL | Zip Code 33414

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 Jesse Lee Antwine, Jr. Date 12-15-96
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

B. REGISTER DEC 31 1996
(See other side for information on intangible tax.)

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Jesse Lee Antwine, Jr. Date