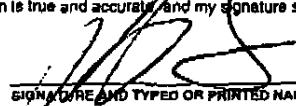


Audit No. H01000010346 4

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Audit No. H01000010346 4 CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K31340			
1. Corporation Name THE BAUMANN COMPANIES, INC. OF FLORIDA			
2. Principal Office Address 1201 Brickell Avenue Suite, Apt. #, etc. Suite 650 City & State Miami, FL Zip 33131 Country USA		3. Mailing Office Address 1201 Brickell Avenue Suite, Apt. #, etc. Suite 650 City & State Miami, FL Zip 33131 Country USA	
4. Date Incorporated or Qualified To Do Business in Florida 08/18/1988		5. FEI Number 65-0067034	
6. CERTIFICATE OF STATUS DESIRED ☐		Applied For Not Applicable \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name BAUMANN, MICHAEL			
Street Address (P.O. Box Number is Not Acceptable) 1201 Brickell Avenue			
Suite, Apt. #, Etc. Suite 650			
City Miami			
State FL		Zip Code 33131	
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		Date 01/23/01	
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
DPTS	BAUMANN, MICHAEL	1201 Brickell Ave. #650	Miami, FL 33131
AS	FRANZEN, TERRY J.	1201 Brickell Ave. #650	Miami, FL 33131
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: 		Michael Baumann, President	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 01/23/01	Daytime Phone # 305-375-0090

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REINSTATEMENT 00-01

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To:

Division of Corporations

Fax Number : (850) 922-4004

From:

Account Name : FOWLER, WHITE, BURNETT, ET AL.

Account Number : 071250001512

Phone : (305) 789-9200

Fax Number : (305) 789-9201

CORPORATION REINSTATEMENT

THE BAUMANN COMPANIES, INC. OF FLORIDA

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$908.75