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

98 APR 14 PM 1:25

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

DOCUMENT # L02317

1. Corporation Name

OCEAN ONE NORTH, INC.

Principal Place of Business — Mailing Address

One North Ocean Boulevard
Boca Raton, Florida 33432

REINSTATEMENT 97-98

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
N/A	N/A	7/17/89

Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number	
N/A	N/A	65-0133066	Applied For

City & State	City & State		Not Applicable
N/A	N/A		

Zip	Country	Zip	Country	6.
N/A	N/A	N/A	N/A	CERTIFICATE OF STATUS DESIRED ☒ — $8.75 Additional Fee required for a Certificate of Status

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
PD	Matthew Giacomino	One North Ocean Boulevard	Boca Raton, Florida 33432
VST	Ernest Willis	c/o Beacon Property Management 500 NE Spanish River Bl. #18	Boca Raton, Florida 33431
D	Sunday Willis	c/o Beacon Property Management 500 NE Spanish River Bl. #18	Boca Raton, Florida 33431

4/14/98

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8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent		
Willis, Ernest W. **Beacon Property Management** **500 N.E. Spanish River Boulevard, #118** **Boca Raton, Florida 33431**	Name	N/A	
	Street Address (P.O. Box Number is Not Acceptable)	N/A	
	Suite, Apt. #, Etc.	N/A	
	City N/A	State FL	Zip Code

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 _____
REGISTERED AGENT MUST SIGN

Date April 13, 1998

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.   Yes ☐   No ☒

(See other side for information on intangible tax.)

12. 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: _____ Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/98
Date   Daytime Phone #

CR2E040 (1/98)

ACCOUNT NO. : 072100000032

REFERENCE : 780286 ____6179A

AUTHORIZATION : *Patricia Pizzuto*

COST LIMIT : $ 908.75

- -

ORDER DATE : April 14, 1998

ORDER TIME : 9:55 AM

ORDER NO. : 780286-005

CUSTOMER NO: 6179A

CUSTOMER: Mr. Lance B. Friedman
           Weiss & Handler, P.A.
           Suite 218 A
           2255 Glades Road
           Boca Raton, FL 33431-7383

- -

DOMESTIC FILINGS

NAME: OCEAN ONE NORTH, INC.

XX____ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lynette Coleman
                      EXAMINER'S INITIALS _____