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<div style="display: flex; justify-content: space-between; align-items: center;"><div style="text-align: center;"><p><b>CORPORATION</b></p></div><div style="text-align: center;"><p>FLORIDA DEPARTMENT OF STATE</p><p><b>Katherine Harris</b></p><p>Secretary of State</p><p>DIVISION OF CORPORATIONS</p></div></div>		<p><b>FILED</b></p> <p>01 OCT 22 PM 4: 29</p> <p>SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>																									
<p><b>DOCUMENT #</b> L34956</p>																											
<p><b>1. Corporation Name</b></p> <p>CITIVEST CONSTRUCTION CORP.</p>																											
<p><b>2. Principal Office Address</b></p> <p>3807 W. SAN MIGUEL ST</p> <p>Suite, Apt. #, etc.</p> <p>City &amp; State TAMPA FL</p> <p>Zip 33629</p> <p>Country US</p>		<p><b>3. Mailing Office Address</b></p> <p>SAME</p> <p>Suite, Apt. #, etc.</p> <p>City &amp; State FL</p> <p>Zip</p> <p>Country</p>																									
		<p><b>4. Date Incorporated or Qualified To Do Business in Florida</b> 12/8/89</p> <p><b>5. FEI Number</b> FB-1873573</p> <p><b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status</p>																									
<p><b>7. Name and Address of Current Registered Agent</b> SAME</p> <p>Name: JOHN GRANDJEF</p> <p>Street Address (P.O. Box Number is Not Acceptable): 101 E. KENNEDY BLVD -</p> <p>Suite, Apt. #, Etc.: #3700</p> <p>City: TAMPA</p> <p>State: FL Zip Code: 33602</p>																											
<p><b>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.</b></p> <p>Signature of Registered Agent: _____ Date: _____</p> <p style="text-align: center;">REGISTERED AGENT MUST SIGN</p>																											
<p><b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 10%;">Titles</th><th style="width: 30%;">Name of Officers and/or Directors</th><th style="width: 30%;">Street Address of Each Officer and/or Director</th><th style="width: 30%;">City / State / Zip</th></tr></thead><tbody><tr><td>DRS</td><td>W. R. ROBINSON</td><td>3807 W. SAN MIGUEL ST</td><td>TAMPA FL 33629</td></tr><tr><td>F</td><td>W. R. ROBINSON</td><td>3807 W. SAN MIGUEL ST</td><td>TAMPA, FL 33629</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table> <p style="text-align: right; margin-top: 20px;">01432 TS</p>				Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	DRS	W. R. ROBINSON	3807 W. SAN MIGUEL ST	TAMPA FL 33629	F	W. R. ROBINSON	3807 W. SAN MIGUEL ST	TAMPA, FL 33629												
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<p><b>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.</b></p> <p><b>SIGNATURE:</b> _____ WILIAM R. ROBINSON 11/2/01 813-831-6677</p> <p style="text-align: center; font-size: small;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>																											



TRANSMITTAL  
*Page 2 of 2*  
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DATE: 11/2/01

To: DEPT. OF CORP.

Attn: TYRONE

Project Number: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

Transmittal Number: \_\_\_\_\_

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☐ Attached

☐ Prints

☐ Change order

☐ Under separate cover via \_\_\_\_\_ the following items:

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☐ Specifications

☐ Other \_\_\_\_\_

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REMARKS I SENT IN MY CHECK IN FEB. 23, 2001 FOR CORP. REPORT  
I NEVER HEARD ANY THING WAS WRONG UNTIL NOW. I HAVE NEVER  
BEEN LATE IN ALL THE YEARS OF THIS CORPORATION. PLEASE WAIVE THE  
LATE FEES.  
TYRONE: PER OUR TELEPHONE DISCUSSION-

SIGNED \_\_\_\_\_