THIS. PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FOR Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS M43787 DOCUMENT # 1. Corporation Name WHIRLWIND, INC. Principal Place of Business Mailing Address One Biscayne Tower Same Suite 3599 2 South Biscayne Blvd If above addresses are incorrect in any way, line through incorrect. New Principal Office Address. DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable 3. New Malling Address, If Applicable 2 So. Biscayne Blvd.
Suite, Apt. #, etc. 12/23/86 Suite, Apt. #, etc. 5 FEI Number Suite 3599 Applied For City & State City & State Not Applicable Miami, \mathbf{FL} \$8.75 Additional Fee required for a Certificate of Status Zip 33131 Country Zin Country CERTIFICATE OF STATUS DESIRED USA 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Title(s) City / State / Zip Miami, FL 33131 2 So. Biscayne Blvd. #3599 P/D Mark J. Bryn 000<u>02590292--</u>3 -07/16/98--01008--012 ***1956.25 ***1956.25 8, Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Mark J. Bryn One Biscayne Tower, Suite 3599 Street Address (P.O. Box Number is Not Acceptable) 2 South Biscayne Blvd. Suite, Apt. #, Etc. Miami, FL 33131 State Zip Code City 10. I, bing appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. 7/8/98 Date DEDISTERED AGENT MUST SIGN 11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. (See other side for information on intangible tax.) Yes 🔛 12. 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 less 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 7/8/98 305-374-0501 Mark J. Bryn, Pres. SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date

CAPITAL CONNECTION, INC.

417 E. Virginia Streef, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
• •	Merger File
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	Dissolution / Withdrawal
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	Fictitious Search
	Fictitious Owner Search
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Requested by: 1002	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Walk-In Will Pick Up	UCC 11 Retrieval



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 10, 1998

WHIRLWIND, INC. C/O CAPITAL CONNECTION, INC. TALLAHASSEE, FL

SUBJECT: WHIRLWIND, INC.

Ref. Number: M43787

We have received your document for WHIRLWIND, INC. and check(s) totaling \$1956.25. However, your check(s) and document are being returned for the following:

The name of the above listed entity is no longer available. Please file an amendment changing the name of this entity. The amendment filing fee is **\$3**5.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Trevor Brumbley Document Specialist

Letter Number: 598A00036917

File Simultanionsly

attro: amendment

Thanks 1717

Converted