

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 FEB 16 PM 4:41

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # M57811

1. Corporation Name

Shore Holdings, Inc.

700088528687

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #
1215 Superior Avenue

3. Mailing Office Address
1215 Superior Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Cleveland, OH

City & State
Cleveland, OH

Zip
44114

Country
USA

Zip
44114

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida **08/21/1987**

5. FEI Number
16-1314230

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code
32301

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with the provisions of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Harry B. Davis

Harry B. Davis
Asst. Vice President

Date **2/16/07**

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
D	Edward O. Handy	1215 Superior Avenue	Cleveland, OH 44114
D	Mark E. Thompson	1215 Superior Avenue	Cleveland, OH 44114
D	Kenneth Urwiller	1215 Superior Avenue	Cleveland, OH 44114

REINSTATEMENT 06-07

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 contained in Chapter 119, 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:

Brendan P. Halligan
Brendan P. Halligan

Date

2/5/07 (401)
757-4462

Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 762985 7495087

AUTHORIZATION :

COST LIMIT : \$ 900

[Handwritten signature]

ORDER DATE : February 16, 2007

ORDER TIME : 1:08 PM

ORDER NO. : 762985-005

CUSTOMER NO: 7495087

DOMESTIC FILINGS

NAME: SHORE HOLDINGS, INC.

RECEIVED
07 FEB 16 PM 2:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - Ext# 2926

EXAMINER'S INITIALS _____