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CAPITAL CONNECTION 850 222 1222 07/22 '98 13:07 NO.954 02/03

PLEASE READ ALL INSTRUCTIONS BELOW BEFORE COMPLETING FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 JUL 28 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M86166

1. Corporation Name
BUYER'S CLUB, INC.

Principal Place of Business	Mailing Address
10297 130th Street Largo, FL 34644	10297 130th Street Largo, FL 34644

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
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 6/15/88

5. FEI Number: 59-2932561 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City/State/Zip
Pres	David F. Lyons	10297 130th Street	Largo, FL 34644
Sec	David F. Lyons	10297 130th Street	Largo, FL 34644
Tres	David F. Lyons	10297 130th Street	Largo, FL 34644

-07/29/98 -760-017 01088
***1200.00 ***1200.00

REINSTATEMENT 95-98
SV 7-28-98

8. Name and Address of Current Registered Agent

David F. Lyons
10297 130th Street
Largo, FL 34644

9. Name and Address of New Registered Agent

Name: David F. Lyons
Street Address (P.O. Box Number is Not Acceptable): 10297 130th Street
Suite, Apt. #, Etc.:
City: Largo State: FL Zip Code: 34644

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: X David F. Lyons (REGISTERED AGENT MUST SIGN) Date: July 23, 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 of 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: X David F. Lyons 7/23/98
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date
David F. Lyons Daytime Phone #