PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED AND FILED

98 AUG 20 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M93105

1. Corporation Name
R & R PUBLISHING, INC.

Principal Place of Business - SAME
1725 EMMETT AVE.
SANFORD, FL. 32771

Mailing Address - SAME

REINSTATEMENT 9-11-98

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

2. New Principal Office Address, If Applicable
SEE ABOVE
Suite, Apt. #, etc
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
SEE ABOVE
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida 8-1-1988

5. FEI Number 59-2909369 ☐ Applied For ☐ Not Applicable

6. 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)

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
P, V.P. S, T.	ROBERT J. REMUS	1725 EMMETT AVE	SANFORD FL. 32771

900002624669--5
-08/25/98--01060--005
***1058.75 ***1058.75

8-21-98

8. Name and Address of Current Registered Agent
ROBERT J. REMUS
1725 EMMETT AVE.
SANFORD, FL 32771

9. Name and Address of New Registered Agent
Name ROBERT J. REMUS
Street Address (P.O. Box Number is Not Acceptable)
1725 EMMETT AVE
Suite, Apt. #, Etc.
City SANFORD FL | State FL | Zip Code 32771

CR2E040 (1-98)

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 R. Remus
REGISTERED AGENT MUST SIGN

Date 8-12-98

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: R Remus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT J. REMUS

8-12-98
Date

(407) 328-3135
Daytime Phone #

Hi —

8-12-98

PLEASE RUSH MY CERTIFICATE OF REINSTATEMENT TO ME A.S.A.P. — I NEED IT FOR A COURT CASE. I HAVE INCLUDED THE EXTRA $ 8.75.

THANK YOU

ROBERT REMOS
1725 EMMETT AVE.
SANFORD FL. 32771

(407) 328-3135