PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS					13 JAN 14 PH 3:58			
DOCUMENT # N0000007938 1. Corporation Name								ALLAHASSEE, FLORIDA				
THE HEART OF THE CITY, DYYC.									REI	NSTATE	MENT	
	NW 7	SAME	3. Mailing Office Address SAME Suite, Apt. #, etc.				10 - 13 CR2E081 (11/10) 4. Date Incorporated or Qualified					
City & State	M, FL	у	City & State				To Do Bus 11/29/2000 5, FEI Numbi	To Do Business in Florida 29/2000 FEI Number Applied For 5-1062031 Not Applied For				
33127 USA							S8.75 Additional Fee required for a Certificate of Status					
Name DWIGHT MOBLEY Street Address (P.O. Box Number is Not Acceptable) 5525 NW 7TH AVE Suite, Apt. #, Etc. City MIAMI						State Zip Code FL 33127			200243622512 01/14/1301037008 **455.00			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the o Signature of Registered Agent REGISTERED AGENT MUST SIGN									bligations of section 607.0505 or 617.0503, F.S.			
9. Name	s and Street A	ddresses	s of Each Officer a	nd/or Director (FI	orida nonpro				ast 3 directors)			
Titles	Name of Officers and/or Directors				Street Address of Eacl Officer and/or Directo			/or Director	ē	City / Sta	•	
PTD	DW	/IGH	HT MOE	LEY	EY 5525 NW 7TH			AVE	MIAMI, F	L 33127		
SD	ME	LOD	DY MOE	BLEY	.EY 5525 NW 7TH			AVE	MIAMI, F	L 33127		
SD	SANDRA HAYWOOD				55	5525 NW 7TH A			AVE	MIAMI, F	L 33127	
VD	K	.LS	55	5525 NW 7TH AV			AVE	MIAMI, F	L 33127			
										JAN 1	<u>4 2013</u>	
				•						S. PRA	THER	
10. E-mail Address: dkmobley@gmail.com (To be used for future annual report notification)												
It 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 fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. SIGNATURE: Dut G LT Mobiler Pros. 01/09/2013 305-469-7730												