PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED

01 JUN -7 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400004416864--5
-06/13/01--01010--020
****490.00 ****490.00

DOCUMENT # N00702

1. Corporation Name

Melbourne House Condominium Association, Inc.

2. Principal Office Address	**3.** Mailing Office Address
227 Australian Avenue	227 Australian Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palm Beach, FL	City & State: Palm Beach, FL
Zip: 33480 Country: USA	Zip: 33480 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 12/30/1983

5. FEI Number: 59-2645406 ☐ 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: Drina C. Parkey

REINSTATEMENT 94-01

Street Address (P.O. Box Number is Not Acceptable): 139 North County Road, Suite 26

City: Palm Beach | State: FL | Zip Code: 33480

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

Signature of Registered Agent: Drina C. Parkey — Drina C. Parkey, Agent — Date: 6/6/01

REGISTERED AGENT MUST SIGN

CR2E061 (9/00)

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
P	John Gay, Jr.	227 Australian Avenue	Palm Beach, FL 33480
VP	Robin Farkas	227 Australian Avenue	Palm Beach, FL 33480
S	George Michel, Jr	227 Australian Avenue	Palm Beach, FL 33480
T	George Merck	227 Australian Avenue	Palm Beach, FL 33480
D	Jane Silva	227 Australian Avenue	Palm Beach, FL 33480
			MW

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 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: George T. Merck — 6/6/01 — 561-6593263

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

DATE: 6-7-01

REF. #: 0724. 16607

CORP. NAME: Melbourne House Condominium Association, Inc.

( ) ARTICLES OF INCORPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT	( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME
( ) FOREIGN QUALIFICATION	( ) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY
(X) REINSTATEMENT	( ) MERGER	( ) WITHDRAWAL
( ) CERTIFICATE OF CANCELLATION	( ) UCC-1	( ) UCC-3

( ) OTHER: _____

FILED
2001 JUN -7 AM 11:17
SECRETARY OF STATE
DIVISION OF CORPORATIONS
ACKNOWLEDGE
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

STATE FEES PREPAID WITH CHECK# 123 **FOR $** 490

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: $**_____

PLEASE RETURN:

MW

( ) CERTIFIED COPY ( ) CERTIFICATE OF GOOD STANDING (X) PLAIN STAMPED COPY

(X) CERTIFICATE OF STATUS

Examiner's Initials