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13 MAY 13 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE C

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

CR2E081 (11/10) 12-13

DOCUMENT # N11000006058

1. Corporation Name

UDABOL FOUNDATION, INC.

2. Principal Office Address - No P.O. Box #
4001 S. Ocean Drive
PH01
Hollywood, Florida
33019 USA

3. Mailing Office Address
4001 S. Ocean Drive
PH01
Hollywood, Florida
33019 USA

4. Date Incorporated or Qualified To Do Business in Florida
6/23/2011

5. FEI Number
[ ] Applied For
[ ] Not Applicable

6. CERTIFICATE OF STATUS DESIRED $30.00 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
City
Plantation
State FL
Zip Code 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

NRAI Services, Inc. as Registered Agent Michele Holden, Assistant Secretary

Signature of Registered Agent

Date 05/13/2013

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
DP	Martin Dockweiler	3er Anillo Interno Radial 23, Edificio Udabol	Santa Cruz, Bolivia
DVP	Carmelo Menacho	3er Anillo Interno Radial 23, Edificio Udabol	Santa Cruz, Bolivia
DS	Rita Pino	3er Anillo Interno Radial 23, Edificio Udabol	Santa Cruz, Bolivia

10. E-mail Address: udabolfoundation@gmail.com
(To be used for future annual report notification)

11. 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., 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: Martin Dockweiler, President 5/10/2013

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

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Williams MAY 13 2013

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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CORPORATION REINSTATEMENT

UDABOL FOUNDATION, INC.

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