

2015 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED

15 JAN 30 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300268951903
01/30/15--01005--001 **297.50



01292015 REIN-NP CR2E099 (12/11)

4. FEI Number Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RONG, FRANK
3116 CAPITAL CIRCLE NE
STE 3
TALLAHASSEE, FL 32304

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Frank Rong

01/29/2015

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2016, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete
P	ALBURY, AUSTIN	1952 HERITAGE CIRCLE	TALLAHASSEE, FL 32304	☐
VP	RUSSELL, TYLER	1952 HERITAGE CIRCLE	TALLAHASSEE, FL 32304	☒
VP	KILPATRICK, TATE	1952 HERITAGE CIRCLE	TALLAHASSEE, FL 32304	☒
T	GALLARDI, DOMINIC	1952 HERITAGE CIRCLE	TALLAHASSEE, FL 32304	☒
S	VANCE, JOSEPH	1952 HERITAGE CIRCLE	TALLAHASSEE, FL 32304	☒
				☐

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
P	Nick Thomson	1952 Heritage circle	Tallahassee, FL 32304	☐	☐
VP	Tyler Beach	1952 heritage circle, Tallahassee, FL	32304	☐	☐
VP	Justin Zepatos	1952 heritage circle, Tallahassee, FL	32304	☐	☐
T	Tanner Bombich	1952 heritage circle Tallahassee, FL	32304	☐	☐
S	Eric Abbott	1952 heritage circle, Tallahassee, FL	32304	☐	☐
				☐	☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nick Thomson

01/30/2015 frank@verygoodcpa.com

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

E MAIL ADDRESS

APR 1/30/15