CORPOR ATION REINSTATEMENT



DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT# N30013

Corporation Name

SECRETARY OF STATE DIVISION OF CORPORATIONS

02 JUN 26 AM 8: 01

01	Keechobee Jayc	ees, Inc.						- 01	v 3
2. Principal Office Address 3525 NE 131s+ LN Suite, Apt. #, etc.		3. Mailing Office Address Po Boメ / 476 Suite, Apt. #, etc.		R	4. Date Incorporated or Qualified To Do Business in Florida 12/15/28				
City & State CKeechobee, FL		OKeechobee, FL		_	5. FEI Number 65-0144476				plied For Applicable
Zip 3 4.9	Country	3497 <u>3</u>	Country	6.	CERTIFICATE	OF STATE		75 Additional lor a Certificate	
		7. Name and	Address of Current I	Registered A	gent				
	Street Address (P.O. Box Number is Not Acceptable) 25-25 NE /3/s+ LH Suite, Apt. #, Etc.				400009856934 01/06/0301008001 **685.00				
	City OKeechobee	٠ .				FL FL	Zip Code 3497.	2	
Signature of Registered	AgentR	Brandel REGISTERED AGENT MUS	T SIGN		<u> </u>		3- 9-0		
9. Names	s and Street Addresses of Each Officer an	nd/or Director (Florida nonpr			directors)				
Titles	Name of Officers and/or Directors	s	Street Address of Each Officer and/or Director			City / State / Zip			
Ø	Patrick J. Car	-uso 225	5 HE 1315	+ Ln	1	01	Keechobee	e, FL J	14972
Ø	Cindy Brandel	2525	T HE 1315	+ 64	<u> </u>	Ok	eechober,	, FL 34	1972
Ø	Christine Caru	30 J25	5 NE 13	31s+ Ln		Ok	eechabee,	FL 30	1972
 					<u> </u>				
				<u></u>	·				
this reis	fy that I am an officer or director or the receinstatement application, the reason for disby the corporation have been paid and the sapplication is true and accurate, and my sapplication is true and accurate.	ssolution has been eliminates e names of individuals listed	o, the corporate name I on this form do not qu	e sausiles trie i jualify for an ex	requirements remption und				