· **	}
CORPO	RATION
REINSTA	NTEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

3. Mailing-Office Address

455 NE 23 TR

N 33386 DOCUMENT #

1. Corporation Name

2. Principal Office Address

465 NE 23 TR

Brighter Days Incorporated



Suite, Apt. #, etc. H City & State City & State			<u> </u>		
			4. Date Incorporated or Qualified To Do Business in Florida () 7 - 21 - 85		
Mian	in FI	Miami	FI	5. FEI Number 45-0137893	Applied For
。 <u>3</u> 313	Country US	zip 3313フ	Country U.S	6.	.75 Additional)Feereg
		7. Name ar	nd Address of Current R	Registered Agent	
	Name Wendy McDaniel Street Address (P.O. Box Number is Not Acceptable) 455 NE 23 TR		000009352210 12/04/0201065004 **684. 7 5		
	Suite, Apit. #, Etc.				
	City Miani.			State Zip Code FL 3313	7

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

Signature of Registered Agent

9: Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip JOE RICHARDS PD Miami, Fla 33137 665 NE 25 Street Alicia Simpson NE 82 TRL #1 Miani, Fla 33137 50 Miani Fla 455 NE 23TR #2 33137 VTD

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Davime Phone #



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 26, 2002

BRIGHTER DAYS, INCORPORATED
CORPDIRECT AGENTS
. US

SUBJECT: BRIGHTER DAYS, INCORPORATED

Ref. Number: N33386

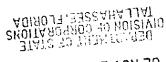
We have received your document for BRIGHTER DAYS, INCORPORATED and check(s) totaling \$684.75. However, your check(s) and document are being returned for the following:

I have enclosed a print-out of the conflict concerning the name availability of the corporation. It appears that someone has tried to file a trademark or servicemark with the name "BRIGHTER DAY", however it was rejected and returned for corrections on 11/08/02. Our office allows 60 days to return any corrected documents before the filing is considered abandoned, therefore the name is not available at this time.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan Document Specialist

Letter Number: 902A00063581



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FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

November 25, 2002

BRIGHTER DAYS, INCORPORATED CORPDIRECT AGENTS*** US

SUBJECT: BRIGHTER DAYS, INCORPORATED

Ref. Number: N33386

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE.

11-25-07

We have received your document for BRIGHTER DAYS, INCORPORATED and check(s) totaling \$684.75. However, your check(s) and document are being returned for the following:

The name of the above listed entity is no longer available. Please file an amendment changing the name of this entity. The amendment filing fee is \$35.00.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan Document Specialist

Letter Number: 102A00063421

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE.

Dlease double check this-

05 NOA 56 PH 11: 35

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