

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 01 AUG -2 AM 10:40 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # N99000002547 1. Corporation Name Justice Calls, Inc.					
2. Principal Office Address Major Center Office Plaza 5728 Major Blvd. Suite 311 Orlando, FL 32819 Zip 32819 Country U.S.A.		3. Mailing Office Address Major Center Office Plaza 5728 Major Blvd. Suite 311 Orlando, FL 32819 Zip 32819 Country U.S.A.		4. Date Incorporated or Qualified To Do Business in Florida April 26, 1999 5. FEI Number Applied For ☒ 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: Barry N. Brumer, Esquire Street Address (P.O. Box Number is Not Acceptable): 5728 Major Blvd. Suite, Apt. #, Etc.: Suite 311 City: Orlando, FL 32819 State: FL Zip Code: 32819					
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: <u>Barry N. Brumer</u> Date: <u>6/29/01</u> 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		
D	Joelle Brumer	5728 Major Blvd.	Orlando, FL 32819		
D	Barry N. Brumer	5728 Major Blvd.	Orlando, FL, 32819		
D	Harry Berger	5728 Major Blvd.	Orlando, FL 32819		
D	Catherines Nielsen	5728 Major Blvd.	Orlando, FL 32819		
05/24/00 90163 047 \$61.25					
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: <u>Barry N. Brumer</u> <u>Barry N. Brumer</u> <u>6/29/01</u> <u>363-2900</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					