

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 NOV -2 AM 8:30

DOCUMENT # P00000007110

1. Corporation Name

TLC Relocations, Inc.

2nd
UBH

2. Principal Office Address

3633 Heron Ridge Ln.

3. Mailing Office Address

3633 Heron Ridge Ln.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Weston - FL

City & State

Weston, FL

Zip

33331

Country

U.S.A.

Zip

33331

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

1/14/2000

5. FEI Number

65-0977794

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

Therese C. Vidal

Street Address (P.O. Box Number is Not Acceptable)

3633 Heron Ridge Lane

Suite, Apt. #, Etc.

Weston

City

Weston

State

FL

Zip Code

33331

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

[Signature]

Date

10/30/01

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
P	Vidal, Therese C	3633 Heron Ridge Ln	Weston, FL 33331
D	Vidal, Victor G	3633 Heron Ridge Ln	Weston, FL 33331

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/01 (954) 659-0400

Date

Daytime Phone #

2 of 2

TLC Relocations Inc.

3633 Heron Ridge Lane
Weston, Florida 33331
Tel: 954-659-0400
Fax: 954-389-6123

October 29, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

RE: Corporate name: TLC Relocations Inc.
Document number P00000007110

I did not receive the uniform business report notice and would like to have the corporate name of TLC Relocations Inc. reinstated. I am enclosing a check for \$158.75 for the renewal of the corporation and the certification of status.

Thank you for your kind consideration of this matter.

Sincerely,



Therese C. Vidal