2004 FOR PROFIT CORPORATION REINSTATEMENT

1. Entity Name	e & ASSO		020 TER DOCTOR, INC Mailing Address 1106 N.E. 23RD AVE.	•				SECRI DIVISION O4 NO 1	ETARY OF CO V-9	OF STATE PRPORATIONS AM 8: 22
OCALA, FL 3			OCALA, FL 34470							
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City & State		4.	City & State Hernando	<i>Al.</i>		4. FEI Numbe 59-362			Not	plied For Applicable
3444 3444	2	Country Ci Tru S	Zip 34442	Coun	17 17145	5. Certificate	of Status Desired		3.75 Addi e Required	
	•	and Address of Current I				7. Name and	Address of New Re	gistered Age	ent	
CLIFTON,	- - - - - - - - - - - - - - - - - - -		· · · · · · · · · · · · · · · · · · ·		Name	JEFF	-P-C/f	Fton	II_{\sim}	
1106 N.E.	23RD AVE				Street Address (P.O. Box Number	er is Not Acceptable)		
OCALA, FL	_ 34470				7255	N.	Natures	trl.		
					City Herr	ando		FL	Zip Code	1442
			r the purpose of hanging its	register			th, in the State of Flo	rida. I am farr		
me ooligan	ions of regist	lend agent.	(<i>#</i>			11/01			_
SIGNATURE_	Signature, typeo	Oprinter having it registered agent	and title if a pricable, (NDT)	E: Register	ed Agent signature requi	red when reinstating)	11/0/	DATE		
		<i>V-U</i>			<u>.</u>					
		EE IS \$750.00 05, Fee will be \$900.0	0							
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NAME	CLIFTON	, JEFF P II		14MM		· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1			.
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