

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000021663

1. Corporation Name
Affordable/Citrus Ridge, Inc.

2. Principal Office Address
801 Westwood Lane

3. Mailing Office Address
801 Westwood Lane

Suite, Apt. #, etc.

City & State
Glencoe, Illinois

City & State
Glencoe, Illinois

Zip
60022

Country
UA

Zip
60022

Country
USA

FILED
2005 APR 28 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05/10/05--01045--000 ***3236.75

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4. Date Incorporated or Qualified To Do Business in Florida 03/01/2000

5. FRI Number ☒ Applied For: ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name
Curtis D. Hamlin, Esq.

Street Address (P.O. Box Number is Not Acceptable)
1205 Manatee Avenue West

Suite, Apt. #, etc.

City
Bradenton

State
FL

Zip Code
34205-7617

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the official requirements of section 607.005 or 617.005, F.S.

Signature of Registered Agent *[Signature]* Date March 29, 2005

REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Jay Abrams	601 Westwood Lane	Glencoe, Illinois 60022

REINSTATEMENT 02-05

\$1200.00

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 607.0051 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 118.07(3)(b), 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]* Jay Abrams, President Date March 29, 2005 (847) 835-8913

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR