PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED
02 AUG -6 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

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

DOCUMENT # P00000024835

1. Corporation Name: STEWART ENTERPRISES OF PACE, INC

REINSTATEMENT 2001-2002

2. Principal Office Address	3. Mailing Office Address
1590 GREENFIELD STREET	4474 WOODBINE Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	SUITE 101
City & State: PACE, FL	City & State: PACE, FL 32571
Zip: 32571 Country: USA	Zip: 32571 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida:

5. FEI Number: 59-3631014 ☐ 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: THOMAS F. STEWART 100006924091--8

Street Address (P.O. Box Number is Not Acceptable): 5626 Champions DR.

Suite, Apt. #, Etc.:

City: PACE State: FL Zip Code: 32571

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: Thomas F. Stewart Date: 5 Aug 02
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	MARTY E. MORRIS	2617 Brook Forest Way	Jay, FL 32565
V	KAREN BERRIAN	1406 BELL CREEK Rd	PACE, FL 32571
S/T	MYRA N. STEWART	5626 Champions Drive	PACE, FL 32571
D	PATRICK G BOWLING	3568 STRATFORD LANE	PACE, FL 32571
D	THOMAS F. STEWART	5626 Champions DRIVE	PACE, FL 32571

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: Karen Berrian 8-3-02 850 994-2277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ACCOUNT NO. : 072100000032

REFERENCE : 694004 7339211

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 908.75

ORDER DATE : August 6, 2002

ORDER TIME : 1:06 PM

ORDER NO. : 694004-005

CUSTOMER NO: 7339211

CUSTOMER: Robin Gay, Legal Asst
E. Brian Lang & Associates,
One West Lloyd Street

Pensacola, FL 32501

RECEIVED
02 AUG -6 PM 2:24
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: STEWART ENTERPRISES OF PACE, INC.

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull

EXAMINER'S INITIALS _____