PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 JUL 16 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 01-03

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07/16/03--01037--016 **1058.75

DOCUMENT # P00000036449

1. Corporation Name
Strong Arm Industries, Inc.

2. Principal Office Address	3. Mailing Office Address
8623 Synhoff Drive	8623 Synhoff Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, Florida 32216	City & State: Jacksonville, Florida
Zip: 32216 / Country: United States	Zip: 32216 / Country: United States

4. Date Incorporated or Qualified To Do Business in Florida: April 6,2000

5. FEI Number: 59-3087120 ☐ 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: Brian K. Tuten
Street Address (P.O. Box Number is Not Acceptable): 8623 Synhoff Drive
Suite, Apt. #, Etc.:
City: Jacksonville | State: FL | Zip Code: 32216

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: Brian K. Tuten — REGISTERED AGENT MUST SIGN
Date: July 14,2003

CR2E081 (10/02)

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.	Brian K. Tuten	8623 Synhoff Drive	Jacksonville, Florida 32216
V.P.	Elijah D. Tuten	8623 Synhoff Drive	Jacksonville, Florida 32216
S.	Peggy Tuten	8623 Synhoff Drive	Jacksonville, Florida 32216

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: Brian K. Tuten — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Brian K.Tuten
Date: 7/14/03
Daytime Phone #: (904)260-9968

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