

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAR 17 PM 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P000000 38.535

1. Corporation Name

The Jama-Ve Group, Inc.

2. Principal Office Address

435 CLARK RD, SUITE 305B  
Suite 305B

3. Mailing Office Address

P.O. Box 2087

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32218

Country

Duval

Zip

32203

Country

Duval

4. Date Incorporated or Qualified  
To Do Business in Florida

4/10/2000

5. FEI Number

59-363 7254

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

VERA BROWN

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

10472 INNISBROOK DRIVE

Suite, Apt. #, Etc.

City

JACKSONVILLE

State

FL

Zip Code

32222

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

Vera Brown

Date

3/9/03

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/T/D	VERA BROWN	10472 INNISBROOK DR. <del>JACKSONVILLE, FL 32222</del>	JAX, FL 32222
V/D	MARILYN DUKES	1303 HUNTINGTON PL. CIRCLE	LITHONIA, GA 30058
S/D	HARRY BROWN	10472 INNISBROOK DR	JAX, FL 32222
D	TEONTIA GENTRY	9838 OLD BAYMEADOWS RD	JAX, FL 32256
D	SHARON RIELY	1017 AKE LAKE	JAX FL 32218

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:

Vera Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/03

Date

765-2631

Daytime Phone #

CR2001 (10/02)

js 3/15

March 10, 2003

To Whom It May Concern:  
Document#: P00000038535  
FEI Number: 59:3637254

I ma enclosing \$300.00 for the reinstatement of THE JAMAVE GROUP, INC. because  
the UBR was not received.

Sincerely,

A handwritten signature in cursive script that reads "Vera Brown". The signature is written in dark ink and is positioned below the word "Sincerely,".

Vera Brown  
Registered Agent  
Vera Brown  
10472 Innisbrook Drive  
Jacksonville, Florida 32222