

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2017 MAR 30 AM 10:45

DOCUMENT # P00000043103

1. Corporation Name

BDG Design Group, PA

MAR 30 2017

L BERGER

000297396790

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida 12/23/2000

5. FET Number
59-3647100

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

Michael Lucas

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

7645 Gate Parkway

Suite, Apt #, Etc

Suite 201

City

Jacksonville

State

FL

Zip Code

32256

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

Michael Lucas

Date 3/30/17

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	Michael Lucas	7645 Gate Parkway, Suite 201	Jacksonville, FL 32256
VP	Paul Basham	7645 Gate Parkway, Suite 201	Jacksonville, FL 32256

10. E-mail Address: stacie@bashamlucas.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

Michael Lucas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/17

Date

Daytime Phone

2 of 2

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 576838 7930346

AUTHORIZATION :

[Signature]

COST LIMIT : \$900.00

ORDER DATE : March 30, 2017

ORDER TIME : 12:41 PM

ORDER NO. : 576838-005

CUSTOMER NO: 7930346

DOMESTIC FILINGS

NAME: BDG DESIGN GROUP, P.A.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - Ext#

EXAMINER'S INITIALS _____

RECEIVED
2017 MAR 30 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA