

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000048006

1. Corporation Name

U.S. PAK-N-SHIP OF ORLANDO, INC.

FILED
02 DEC 19 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 UBR

Principal Place of Business

1363 SHELTER ROCK ROAD
ORLANDO FL 32835

Mailing Address

1363 SHELTER ROCK ROAD
ORLANDO FL 32835



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/15/2000

5. FEI Number

59-3645173

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	EMERTON, ROGER C	1363 SHELTER ROCK ROAD	ORLANDO FL 32835
ST	EMERTON, HEPISIPA	1363 SHELTER ROCK ROAD	ORLANDO FL 32835

200009602682
12/19/02--01091--005 **150.00

8. Name and Address of Current Registered Agent

EMERTON, ROGER C
1363 SHELTER ROCK ROAD
ORLANDO FL 32835

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

DEC 19, 2002

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., 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HEPISIPA EMERTON

Date

Daytime Phone #

12/11/02
407-294-9058

CR2E040 (8/02)

2012

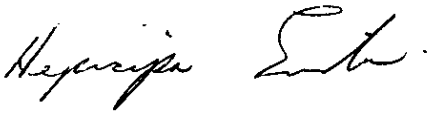
U.S.Pak-N-Ship of Orlando Inc.
2457A South Hiawasse Road
Orlando FL 32835
Telephone 407-294-9058
Fax 407-294-9063

December 11, 2002

Department of State/Division of Corporation

Enclosed is our application for reinstatement received December 6th, 2002.

No previous request has been received at this office. The fee of \$150.00 is enclosed.



Hepisipa Emerton
Treasurer