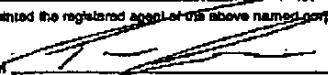
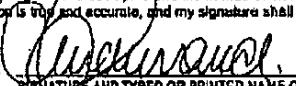


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06 MAY - 4 PM 12:05SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P00000053228			
1. Corporation Name RIVETS UNLIMITED (FLORIDA), INC.			
2. Principal Office Address 11828 Miramar Parkway Suite, Apt. #, etc. Building 9, Bay 3 City & State Miramar, Florida Zip 33025		3. Mailing Office Address 2670 Paulus Suite, Apt. #, etc. City & State Ville Saint-Laurent, Quebec Zip H4S 1G1 Country Canada	
4. Date Incorporated or Qualified To Do Business in Florida 6/1/00			
5. FEI Number 65-1024788		Applied For ☐ Not Applicable ☐	
6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Addl unit fee required for a Certificate of Status			
7. Name and Address of Current Registered Agent Name Paul Dubois Street Address (P.O. Box Number is Not Acceptable) 11828 Miramar Parkway Suite, Apt. #, Etc. Building 9, Bay 3 City Miramar, Florida State FL Zip Code 33025			
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  Date 4/25/06 REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Yves Dandurand	1660 Carpentier	Boisbriand, Quebec, Canada J7G 3A7
Sec.	Lyne Dandurand	5 Des Visconti	Blainville, Quebec, Canada J7B 1P2
Tres.	Lyne Dandurand	5 Des Visconti	Blainville, Quebec, Canada J7B 1P2
Director	Yves Dandurand	1660 Carpentier	Boisbriand, Quebec, Canada J7G 3A7
Director	Lyne Dandurand	5 Des Visconti	Blainville, Quebec, Canada J7B 1P2
Director	Paul Dubois	1749 N.W. 80th Ave., Unit 36C	Margate, Florida 33063
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 contained in Chapter 119, 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:  Yves Dandurand, President 4/25/06 514-337-7534 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

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Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CORPORATION REINSTATEMENT**RIVETS UNLIMITED (FLORIDA), INC.**

Certificate of Status	0
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