PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION ISTATEMENT		DEPARTMENT OF S Secretary of State ISION OF CORPORATIONS	STATE		FILED  AUG -7 PH 1: I	•	
DOCUMENT # P00000057330  1. Corporation Name					ΤΔΙ	LLAHASSEE, FL <mark>ORI</mark>	DΑ	
Mat	Depot, Inc.							
2. Principal Office Address - No P.O. Box # 3. Mailing O			Office Address					
1516 Orchard Hill Road   1516 O			rchard Hill Road			CR2E081 (1/07)	1	
Suite, Apt. #, etc. Suite, Apt. #			<del></del>					
						porated or Qualified	3 00	
City & State City & State							3-00	
LaGrange, Georgia LaGrang			ge, Georgia		5. FEI Numbe	65-1019473	Applied For Not Applicable	
Zip 30240	Country USA	Zip 3024	40 Country USA		6. CERTIFICATE	S8.7	5 Additional Fee required or a Certificate of Status	
	7. Name and Addr	ess of Current Regis	stered Agent					
Duncan B. Allen					The reinstatement fee is imposed, except in circumstances which the entity did not receive			
Street Address (P.O. Box Number is Not Acceptable)					the prior notices. By checking this box, you			
82 South Bishop Road Suite, Apt #, Etc.					are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
City Santa Rosa Beach State Zip Code FL 32459-3674								
<b>8.</b> I, being	appointed the registered agent of th	e above named corpo	pration, am familiar with and ac	cept the ob	ligations of section	on 607.0505 or 617.0503, F.S.		
Signature of Registered		REGISTERED AG	ENT MUST SIGN	<del></del>	<del></del>	Date 8 - 6 - 0	٥٦	
O Nome				and link at law	nt O dispetant			
Titles	ames and Street Addresses of Each Officer and/or Director (Flo S Name of Officers and/or Directors		Street Address of Each Officer and/or Director		st 3 (medicis)	City / State / Zip		
P	Peter Binnington		1516 Orchard Hill Road		oad	LaGrange, Geo	rgia 30240	
S/T	Duncan B. Allen		82 South Bishop Road		Santa Rosa Bea	ch,FL 32459-3674	4	
	DITTRIA' A d	'n 15 m - 15			08	40010749 /07/0701050	33094 004 **308.7	
	REINSIAI	EME	11 08-0	1				
		<b>th</b>						
this rei owed t on this	that I am an officer or director or the nstatement application, the reason for by the corporation have been paid and application is true and accurate, and	r dissolution has been the names of individ	eliminated, the corporate namuals listed on this form do not d	ne satisfies ti qualify for ar	he requirements n exemption cont path.	of section 607.0401 or 617.040 alned in Chapter 119, F.S. The	01, F.S., that all fees a information indicated	
SIGNA	SIGNATURE AND TYPED O Peter Binnin	R PRINTED HAME OF S	SIGNING OFFICER OR DIRECTOR	R	<u> </u>	-07 706 - Date Daytin	me Phone #	



## DANIEL, HADDEN, & ALFORD, P. C.

## **ATTORNEYS**

202 North Lewis Street, P.O. Box 2249, LaGrange, Georgia 30241 Telephone (706) 882-9261 • Facsimile (706) 845-7916

A. E. Daniel, III J. Wayne Hadden Peter T. Alford

August 6, 2007

## FEDERAL EXPRESS

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Dear Sir or Madam:

In accordance with the Code of Florida you will find enclosed the following documents:

- 1. Corporation Reinstatement which is submitted for filing with respect to Mat Depot, Inc.;
  - 2. Check payable to Florida Department of State for filing fee.

We would also appreciate your returning the Certificate of Status to the undersigned.

Thank you in advance for handling this request.

Sincerefy,

DANIÉL/HADDEN & ALFORD, P. C.

₩ayn⁄e Hadden

WH/jun [Enclosures]