

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; background-color: black; color: white; font-size: 40px; font-weight: bold; display: flex; align-items: center; justify-content: center;"> P00000070755 </div> <div style="position: absolute; bottom: 0; right: 0; border: 1px solid black; padding: 5px; font-weight: bold;">750.00</div> </div>																					
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>APPLICANT'S NAME FOR REINSTATEMENT</p> </div> <div style="text-align: center;"> <p>FLORIDA DEPARTMENT OF STATE Sandra L. Norman Secretary of State DIVISION OF CORPORATIONS</p> </div> </div>																					
<p><b>DOCUMENT #</b> P00000070755</p>																					
<p><b>1. Corporation Name</b></p> <p style="text-align: center;">Jed Real Estate, Inc.</p>																					
<p><b>Principal Place of Business</b>      <b>Mailing Address</b></p> <p style="text-align: center;">7000 West Palmetto Park Rd., Ste. 200 Boca Raton, FL 33433</p> <p style="text-align: right; margin-top: 10px;">9/21/01</p>																					
<p><small>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</small></p>																					
<p><b>2. New Principal Office Address, If Applicable</b> 1903 S. Atlantic Avenue</p> <p>Suite, Apt. #, etc.</p> <p>City &amp; State Daytona Beach Shores, FL</p> <p>Zip      Country 32118      USA</p>	<p><b>3. New Mailing Office Address, If Applicable</b> Post Office Box 2599</p> <p>Suite, Apt. #, etc.</p> <p>City &amp; State Daytona Beach, FL</p> <p>Zip      Country 32118      USA</p>																				
<p><b>4. Date Incorporated or Qualified To Do Business in Florida</b>      7/25/00</p>																					
<p><b>5. FEI Number</b>      <b>Applied For</b></p> <p>65-1038731      <input type="checkbox"/> Not Applicable</p>																					
<p><b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b></p>																					
<p><b>7. Names and Street Addresses of Each Officer and/or Director</b> (Florida nonprofit corporations must list at least 3 directors)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">1</th> <th style="width: 30%;">2</th> <th style="width: 30%;">3</th> <th style="width: 30%;">4</th> </tr> <tr> <th>Title(s)</th> <th>Name of Officers and/or Directors</th> <th>Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>P</td> <td>Earl McKenzie</td> <td>1903 S. Atlantic Avenue</td> <td>Daytona Beach Shores, FL 32118</td> </tr> <tr> <td>S/T</td> <td>Dianne McKenzie</td> <td>1903 S. Atlantic Avenue</td> <td>Daytona Beach Shores, FL 32118</td> </tr> <tr> <td colspan="4" style="text-align: center;"> <p><b>REINSTATEMENT 2.001</b></p> </td> </tr> </tbody> </table>		1	2	3	4	Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip	P	Earl McKenzie	1903 S. Atlantic Avenue	Daytona Beach Shores, FL 32118	S/T	Dianne McKenzie	1903 S. Atlantic Avenue	Daytona Beach Shores, FL 32118	<p><b>REINSTATEMENT 2.001</b></p>			
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<p><b>8. Name and Address of Current Registered Agent</b></p> <p>Steven Garellek 7000 West Palmetto Park Road, Ste. 200 Boca Raton, FL 33433</p>																					
<p><b>9. Name and Address of New Registered Agent</b></p> <p>Name      <b>James L. Rose</b></p> <p>Street Address (P.O. Box Number is Not Acceptable) 222 Seabreeze Blvd.</p> <p>Suite, Apt. #, Etc.</p> <p>City      State      Zip Code Daytona Beach      FL      32118</p>																					
<p><b>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.</b></p> <p>Signature of Registered Agent      Date <u>11-4-01</u></p> <p style="text-align: center;">REGISTERED AGENT MUST SIGN</p>																					
<p><b>11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.</b>      Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>      (See other side for information on intangible tax.)</p>																					
<p><b>12. 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.</b></p>																					
<p><b>SIGNATURE:</b> <u>[Signature]</u>      Date <u>11/2/01</u>      Daytime Phone # <u>386-257-1222</u></p> <p style="text-align: center;"><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></p>																					

CR2E040 (1/98)