PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT -8 AM 11:08

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

Fax Audit No. H01000105402

DOCUMENT # P00000074490

1. Corporation Name
MDJR Construction, Inc.

REINSTATEMENT

2. Principal Office Address	3. Mailing Office Address
200 Laura Street	200 Laura Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, FL	City & State: Jacksonville, FL
Zip: 32202 Country: U.S.A.	Zip: 32202 Country: U.S.A.

4. Date Incorporated or Qualified To Do Business In Florida: 8/7/2000

5. FEI Number: [ ] 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: F&L Corp.

Street Address (P.O. Box Number is Not Acceptable): 200 Laura Street North

Suite, Apt. #, Etc.:

City: Jacksonville State: FL Zip Code: 32202

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: F&L CORP. By: [signature] Charles V. Hedrick, Authorized Signatory Date: October 3, 2001
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/T	Michael O'Hara	200 Laura Street	Jacksonville, FL 32202
V/S	Donna O'Hara	200 Laura Street	Jacksonville, FL 32202

CR2E031 (8/00)

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 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: Michael O'Hara 10/4/01 904/260-9293
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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

From:
Account Name : FOLEY & LARDNER
Account Number : 072720000061
Phone : (904)359-2000
Fax Number : (904)359-8700

CORPORATION REINSTATEMENT

MDJR CONSTRUCTION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$750.00