PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 1 of 2

APPLICATION FOR REINSTATEMENT

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

202 4BR

FILED
02 OCT 28 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000095081

1. Corporation Name

UNITED CHEMICAL INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
6900 SW 21 COURT BAY 13 DAVIE FL 33317	6900 SW 21 COURT BAY 13 DAVIE FL 33317

600008516866
10/28/02--01063--010 **150.00

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 10/09/2000

5. FEI Number: 65-1044829 ☐ 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
PTD	NICHOLS, DORAND A	13408 NW 5 PL	PLANTATION FL 33325
SD	NICHOLS, TARA	13408 NW 5 PL	PLANTATION FL 33325
		2440 S.W. 102 ND DR PLEASE CORRECT = NEW ADDRESS	DAVIE, FL 33325

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
HAYDEN, STEPHEN M 275 NE 48 STREET POMPANO BEACH FL 33064	Name: DORAND NICHOLS Street Address (P.O. Box Number is Not Acceptable): 2440 S.W. 102 NO DRIVE Suite, Apt. #, Etc.: City: DAVIE State: FL Zip Code: 33324

CR2E040 (8/02)

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 — Date: 10/23/02
REGISTERED AGENT MUST SIGN

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 REQUIRED — 10/23/02 — 954-236-6363
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2052

UNITED
CHEMICAL INTERNATIONAL
6900 SW 21st COURT #13 DAVIE, FL 33317

October 23, 2002

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Uniform business report

To whom it may concern:

Please see the enclosed form for reinstatment. Please note the changes in addresses and Registered agent. We have not received any prior notices. Please accept our check for $150.00 and make the highlighted changes to our records.

Thank you,

Dorand Nichols
President