PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PAGE 10/2

**APPLICATION FOR** 



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

**DIVISION OF CORPORATIONS** 

P00000097822

1. Corporation Name

L.P.T. UNLIMITED ENTERPRISES, INC.

Principal Place of Business

Mailing Address

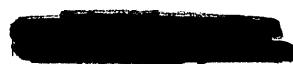
4130 NW 6TH ST.

4130 NW STHEST.

P.O. Box 237

FILED 01 OCT 15 PM 6: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA



GAINESVILLE FL 32609			GAMESVILLE FL 32609 OU Town, FL32680					A STATE OF STREET				
If above a	ddresses are	incorrect in any way, line the										
					ng Office Address, If Applicable  **Box 237**			Date Incorporated or Qualified     To Do Business in Florida     10/16/2000				
Suite, Apt. #, etc. Suite, Apt. #				own, FL			5. FEI Number Applied For					
City & State City & State							59-3672722 Not Applicable					
21p 32680 Country 3268					CERTIF			CATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status				
7. Names a	and Street Ad	dresses of Each Officer and	or Director (Flo	rida nonpro	fit corpora	tions must list at lea	st 3 directors)					
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip				
D	TOUCHTON, LINDA P			PO BOX 237				OLD TOWN FL 32680				
D	тоиснто	PO BOX 237			OLD TOWN FL 32680							
3		500046527166 -10/25/0101030024 ****158.75 *****158.75						· <b>B</b> 75				
<b>)</b> =												
	e and Address of Current	nt			Name and Address of New Registered Agent							
						Name					(8/01)	
TOUC	A P	Street Address (			P.O. Box Number is Not Acceptable)							
COUNTRY RD 351-U							1				CR2E040	
OLD TOWN FL 32680					Suite, Apt. #, Etc.						ြိ	
						City			State <b>FL</b>	Zip Code		
10. I, being	appointed th	e registered agent of the ab	ove named corpo	ration, am 1	familiar wit	th and accept the ob	oligations of Sect	tion 607.0505, F.S.				
Signature of Registered Agent Agent Date 10/16/01												
11. I certify	that I am an	officer or director or the rece	iver or trustee en	npowered to	o execute	this application as p	rovided for in ch	apter 607 or 617, F.S	6. I further c	ertify that when fi	ling	

this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617. 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.

pageron

L.P.T. UNLIMITED ENTERPRISES, INC. P00000097822 P.O. Box 237 Old Town, FL 32680

Oct. 16, 2001

FLORIDA DEPT OF STATE Katherine Harris, Sec. Of State DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, Florida 32314

SUBJECT: L.P.T. UNLIMITED ENTERPRISES, INC.
DOCUMENT NUMBER: P00000097822

Please accept this letter as my confirmation that the previous report forms were not received. They were mailed to the business location address and I was never in receipt of them. It was the intent of the corporation to purchase the business located at 4130 NW 6<sup>th</sup> St. Gainesville, FI 32609, in October last year. However, the purchase didn't take place until October 1<sup>st</sup> of this year. I came across the Revocation Certificate along with other business mail and I am anxious to take care of the problem and get the Corporate Name and Document Number back in good standing.

Today, October 16<sup>th</sup>, I spoke with Eula with the Division of Corporations and explained what had happened. Eula instructed me to write a letter requesting reinstatement and to enclose a check in the amount of One Hundred, Fifty Dollars. I have enclosed a check in the amount sufficient to cover the reinstatement as well as a Certificate of Status, total remittance in the amount of One Hundred, Fifty-Eight Dollars and 75 cents.

Your consideration regarding the reinstatement of Document #P00000097822 with the remittance of \$150.00 will be appreciated.

Sincerely,

Linda P. Touchton, Director

inda P. Touchto

L.P.T. UNLIMITED ENTERPRISES, INC.

PS: Please note change of mailing address: P.O. BOX 237, OLD TOWN, FL 32680 (My home address) Also, note the FEI Number 59-3672722