

APPLICATION
FOR

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000097822

1. Corporation Name

L.P.T. UNLIMITED ENTERPRISES, INC.

Principal Place of Business

4130 NW 6TH ST.
GAINESVILLE FL 32609

Mailing Address

4130 NW 6TH ST.
GAINESVILLE FL 32609P.O. Box 237
Old Town, FL 32680

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/16/2000

5. FEI Number

59-3672722

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)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| D | TOUCHTON, LINDA P | PO BOX 237 | OLD TOWN FL 32680 |
| D | TOUCHTON, JOHN R | PO BOX 237 | OLD TOWN FL 32680 |
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-10/25/01--01030--024
****158.75 ****158.75

8. Name and Address of Current Registered Agent

TOUCHTON, LINDA P
COUNTRY RD 351-U
OLD TOWN FL 32680

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

Signature of
Registered AgentLinda P. Touchton
REGISTERED AGENT MUST SIGN

Date

10/16/01

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:

Linda P. Touchton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/16/01

Daytime Phone #

352-542-7733

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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 6th St. Gainesville, FL 32609, in October last year. However, the purchase didn't take place until October 1st 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 16th, 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
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