PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

02-03

FILED
03 JAN 28 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000113441

1. Corporation Name

MARLEY & SCROOGE, INC.

Principal Place of Business	Mailing Address
~~451 SURFSIDE LANE~~ ~~JUNO BEACH FL 33408~~	~~451 SURFSIDE LANE~~ ~~JUNO BEACH FL 33408~~

300011127443
01/28/03--01040--006 **300.00

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
2400 Bay Village Ct.	2400 Bay Village Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palm Beach Gardens, FL	City & State: Palm Beach Gardens, FL
Zip: 33410 Country: USA	Zip: 33410 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/11/2000

5. FEI Number: 65-1083809 ☐ 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
D	PINNA, TERRY J	~~451 SURFSIDE LANE~~	~~JUNO BEACH FL 33408~~
		2400 Bay Village Ct.	Palm Beach Gardens 33410

8. Name and Address of Current Registered Agent

~~CORPORATE CREATIONS NETWORK INC.~~ Terry Pinna
~~941 FOURTH STREET #200~~ 2400 Bay Village Ct.
~~MIAMI BEACH FL 33139~~ Palm Beach Gardens 33410

9. Name and Address of New Registered Agent

Name: Terry Pinna
Street Address (P.O. Box Number is Not Acceptable): 2400 Bay Village Ct
Suite, Apt. #, Etc.:
City: Palm Beach Gardens State: FL Zip Code: 33410

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: 1/15/03
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: Terry Pinna SIGNATURE REQUIRED 1/15/03 561 801-3467
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

1/15/03

Re Marley & Scrooge, INC

FEI 65-1083809

To whom it may concern:

I Recieved application for Reinstatement from the Florida Department of state. As I have not Recieved any letters from the state Regarding Removal of my corporation most likely Because I have moved. I have corrected the new address and new Registered Agent.

I am Enclosing a check for $300.00 which represents Fees for years 2002 and 2003. If you have any questions Please contact me By Letter at my changed address or contact me personally at 561-801-3467.

Thank you.

Terry T. Pinna, PMS