

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN 22 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

THE IVY GROUP INC.
P00000114937

2. Principal Office Address

114 CHERRY HILL CIRCLE
Suite, Apt. #, etc.

3. Mailing Office Address

114 CHERRY HILL CIRCLE
Suite, Apt. #, etc.

City & State

LONGWOOD FL

Zip Country
32779 USA

City & State

LONGWOOD FL

Zip Country
32779 USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/15/2000

5. FEI Number

593688358

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

GEORGE DONOVAN

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

114 CHERRY HILL CIRCLE

Suite, Apt. #, Etc.

City
LONGWOOD

State
FL

Zip Code
32779

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

George P. Donovan
REGISTERED AGENT MUST SIGN

Date 5-22-2004

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
SD	John J Soety	114 CHERRY HILL CIRCLE	LONGWOOD FL 32779
PD	George P. Donovan	114 CHERRY HILL CIRCLE	Longwood, FL 32779

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:

George P. Donovan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-22-2004

Date

407-696-4334

Daytime Phone #

CR2001 (01/04)