

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA 09 JAN -14 PM 1:31																								
DOCUMENT # <u>P01000001603</u> 1. Corporation Name <u>Parsi HERBS, INC</u>																											
2. Principal Office Address - No P.O. Box # <u>132 North Fed Hwy</u> Suite, Apt. #, etc. _____ City & State <u>Deerfield Beach Florida</u> Zip Country <u>33441 U.S.</u>		3. Mailing Office Address Suite, Apt. #, etc. _____ City & State <u>Florida</u> Zip Country _____																									
7. Name and Address of Current Registered Agent Name <u>ELAtteh Anahitta Jafari</u> Street Address (P.O. Box Number is Not Acceptable) <u>132 N Fed Hwy</u> Suite, Apt. #, Etc. _____ City <u>Deerfield Beach</u> State <u>FL</u> Zip Code <u>33441</u>			4. Date Incorporated or Qualified To Do Business in Florida <u>1-4-2001</u> 5. FEI Number <u>65-1066373</u> Applicable Line Not Applicable 6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional fee required for a Certificate of Status																								
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 <u>[Signature]</u> Date <u>12/30/08</u> REGISTERED AGENT MUST SIGN																											
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Titles</th> <th>Name of Officers and/or Directors</th> <th>Street Address of Each Officer and/or Director</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>CEO</td> <td>ELAtteh A. Jafari</td> <td>132 N Fed Hwy</td> <td>Deerfield Bch, FL 33441</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	CEO	ELAtteh A. Jafari	132 N Fed Hwy	Deerfield Bch, FL 33441																
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REINSTATEMENT <u>07-08^{Ks}</u>																											
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 contained in Chapter 119, 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: <u>[Signature]</u> Date <u>12/30/08</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																											

Parsi Herbs

TO : KAREN SALLY
FROM : PARSI HERBS

THIS LETTER IS TO INFORM YOU , THAT WE HAVE NOT RECEIVED ANY LETTERS OR ANY OTHER FORMS OF CORRESPONDENCE FROM YOU OR STATE OF FLORIDA IN ORDER TO REIENSTATE OUR CORPORATION .

ALL THE CORRESPONDENCE HAS BEEN SENT TO A DIFFERENT ADDRESS , ALTHOUGH OUR ADDRESS WAS REGISTERED IN YOUR RECORDS AS :

132 N FED HWY
DEERFIELD BEACH FLORIDA

LETTERS HAVE BEEN SENT TO
132 N FED HWY
BOCA RATON FLORIDA

THANK YOU
ELAHEH ANAHITTA JAFARI
PARSI HERBS

1/14/09