PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS
W05000034863

FILED
05 SEP 19 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000005159

1. Corporation Name
Lockhart International Investigation And Security Patrol, Incorporated

REINSTATEMENT 02-05

2. Principal Office Address	**3.** Mailing Office Address
519 25th St.	519 25th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Bch, Fl	City & State: West Palm Bch, Fl
Zip: 33407 Country: USA	Zip: 33407 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1-12-01

5. FEI Number: [redacted] ☑ 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 J. Lockhart
300057616033
09/27/05--01010--003 **30.00

Street Address (P.O. Box Number is Not Acceptable): 519 25th St.
300057616033
07/18/05--01070--008 **30.00

Suite, Apt. #, Etc.

City: West Palm Beach | State: FL | Zip Code: 33407

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: See below — Date: _____
REGISTERED AGENT MUST SIGN

CR2E081 (01/06)

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
P	George J. Lockhart	627 30th St.	W.P.B. Fl 33407
VP	George L Lockhart	944 44th St.	W.P.B Fl 33407
S	Aaron D. Lockhart	944 44th St.	W.P.B. Fl 33407
T	Anthony R. Lockhart	944 44th St.	W.P.B. Fl 33407

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.

561.685-4640

SIGNATURE: George J Lockhart — 7-12-05 — Sec. 659-6444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #