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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000005478

1. Corporation Name
Mercatus Group, Inc.

2. Principal Office Address	3. Mailing Office Address
6010 Duclay Rd., Unit 15	6010 Duclay Rd., Unit 15
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, Florida	City & State: Jacksonville, Florida
Zip: 32244 Country: Clay	Zip: 32244 Country: Clay

4. Date Incorporated or Qualified To Do Business in Florida: 1/16/2001

5. FEI Number: 59-3691263 ☐ 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: Business Filings Incorporated

Street Address (P.O. Box Number is Not Acceptable): 1203 Governors Square Blvd, Suite 101

Suite, Apt. #, Etc.:

City: Tallahassee State: FL Zip Code: 32301-2960

B. 1/19/07
REINSTATEMENT 07-07

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: _____ Date: 12/13/06

REGISTERED AGENT MUST SIGN Mark Schiff, AVP, Business Filings Incorporated

CR2E081 (8/01)

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
President	F. Mark Bojarzin	6010 Duclay Rd., Unit 15	Jacksonville, Florida 32244
Secretary	F. Mark Bojarzin	6010 Duclay Rd., Unit 15	Jacksonville, Florida 32244
Treasurer	F. Mark Bojarzin	6010 Duclay Rd., Unit 15	Jacksonville, Florida 32244
Director	F. Mark Bojarzin	6010 Duclay Rd., Unit 15	Jacksonville, Florida 32244
Director	Susan M. Bojarzin	6010 Duclay Rd., Unit 15	Jacksonville, Florida 32244

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: _____ F. Mark Bojarzin, President 07 Dec '06 904-232-5213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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P.02

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

MERCATUS GROUP, INC.

Certificate of Status	0
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