

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

06 FEB 15 PM 3:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *P01000014562*

1. Corporation Name

*M & J Custom Brick, INC.*

2. Principal Office Address

*520 Rosedale Ave.*

Suite, Apt. #, etc.

City & State

*Longwood, FL*

Zip *32750*

Country

*USA*

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT** *04-C6*

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

*02/07/2009*

5. FEI Number

*52-2295017*

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

*Josie Mercer-Wootton*

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

*520 Rosedale Ave*

Suite, Apt. #, Etc.

City

*Longwood*

*500066133895*

*02/17/06--01030--023 \*\*45.75*

State  
**FL**

Zip Code

*32750*

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

*Josie Mercer-Wootton*

REGISTERED AGENT MUST SIGN

Date *2-9-06*

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
<i>President</i>	<i>JOSIE MERCER-WOOTTON</i>	<i>520 Rosedale Ave</i>	<i>Longwood, FL 32750</i>

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: *Josie Mercer-Wootton* *JOSIE MERCER-WOOTTON* *2-9-06* *407-767-7578*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2-9-16

Dept of State

I am sending this letter to  
have M+J Custom Brick, Inc reinstated.  
I didn't receive anything (notices etc.)  
telling me in the year of dissolution/  
revocation.

Sincerely

Josie Mercer-Wootton  
520 Rosedale Ave  
Longwood, FL 32750  
407-767-7578