

DEC. 30. 2004 11:04AM

CORPORATION SVC CO

DEC-29-2004 14:57

JEN LOMBARDO PC

H.CNO. 238025P. 296 3

P.13

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # P01000014782

1. Corporation Name

Micron Corporation

FILED

04 DEC 30 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

03-04

MRS

2. Principal Office Address		3. Mailing Office Address		4. Date incorporated or qualified to do business in Florida	
Lakeside Technology Center		Lakeside Technology Center		Feb. 8, 2001	
Suite, Apt. #, etc. 5730 Hoover Boulevard		Suite, Apt. #, etc. 5730 Hoover Boulevard		5. FEI Number 59-3696844	
City & State Tampa, FL		City & State Tampa, FL		Assessed For Not Applicable	
Zip 33634	Country USA	Zip 33634	Country USA	6. CERTIFICATE OF STATUS DESIRED ☐ (SEE INSTRUCTIONS FOR FILING OF THIS FORM)	

7. Name and Address of Current Registered Agent

Name

Ronald Benson c/o Inteleservices, Inc.

Street Address (P.O. Box number is not acceptable)

Lakeside Technology Center, 5730 Hoover Boulevard

City, Apt. #, etc.

Tampa

State
FLZip
33634

I, the undersigned, being a registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0225 or 617.0209, F.S.

Registered Agent

Ronald Benson

REGISTERED AGENT MUST SIGN

Date December 28, 2004

8. Names and Street Addresses of Each Officer and/or Director (Please print names of corporations and list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Ronald Benson	11234 West Hillsboro Avenue	Tampa, FL 33635

10. I certify that I am an officer or director of the corporation or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. Further certifying that when filing this 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 for the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.072(1), F.S. The information provided is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SENDING OFFICER OR DIRECTOR

12/28/04

DATE

CERTIFY HERE

Ronald Benson

TOTAL P.13

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Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
Fax Number : (850) 205-0384

TKT

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

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CORPORATION REINSTATEMENT

MICRON CORPORATION

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