

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN 16 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P010000030987

1. Corporation Name

LUCKY DILL DOWNTOWN, INC.

2. Principal Office Address

36750 U.S. HIGHWAY 19 N

Suite, Apt. #, etc.

#2114

City & State

PALM HARBOR

Zip

FL

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/22/2001

5. FEI Number

593712173

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$9.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 01-04

7. Name and Address of Current Registered Agent

Name

JASON G. MITOW

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

36750 U.S. HIGHWAY 19 N

Suite, Apt. #, Etc.

#2114

City

PALM HARBOR

State

FL

Zip Code

34684

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

1/13/04

REGISTERED AGENT MUST SIGN

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
D	JASON G. MITOW	36750 U.S. HIGHWAY 19 N, #2114	PALM HARBOR, FL 34684

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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/13/04

Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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To:

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

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN
Account Number : 076077001654
Phone : (813) 273-4304
Fax Number : (813) 273-4396

CORPORATION REINSTATEMENT

LUCKY DILL DOWNTOWN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,050.00

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