

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV -6 PM 4:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

P01000041834

1. Corporation Name

Tami's Place, Inc

2. Principal Office Address

8561 NW 52nd St  
Suite, Apt. #, etc.

3. Mailing Office Address

8561 NW 52nd St  
Suite, Apt. #, etc.

City & State

Lauderhill  
Zip

Country

Broward

City & State

FL

Zip

33351

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

4-25-2001

5. FEI Number 65-1089468

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

Barbara Hill

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

8561 NW 52nd St

Suite, Apt. #, Etc.

City

Lauderhill

State  
FL

Zip Code

33351

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

Barbara Hill

REGISTERED AGENT MUST SIGN

Date 10-31-02

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	Barbara Hill	8561 NW 52nd St	Lauderhill, FL
D	Tami E. Hill	8561 NW 52nd St	Lauderhill, FL 33351

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:

Barbara Hill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-31-02

Daytime Phone #

954448-

0755

CR2ED01 (8/01)

243  
October 31, 2002

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Fl. 32314

Re: Tami's Place Inc.  
Reinstatement

To the office of Div. Of Corporations

Just this week I was informed that my corporation was dissolved. It came as a great surprise to me. However in Tracking down the reason, I found that my previous address Has never been changed by your office.

Attached is a copy of letter dated December 20, 2001 requesting The Dept. of State to change my address from 13800 Alexandria Court, David, Fl. 33325 to 8561 NW 52<sup>nd</sup> Street.,. Lauderhill, Fl. 33351. Evidently this was not received by you and the change of address never occurred. I never received any reports, forms, Etc. from you and never realized that I had not received any since I have other corporations and business that I work with also.

I am enclosing a reinstatement form, along with \$150.00 for the original fee. As per your phone recording, the original fee will be allowed as long as no forms or packages were ever received by me.....

If you have a problem, please call me at 954 448-0755 which is my cell phone. Time is very important for me as I am selling my Business and need to have this taken care of immediately.

Thank you

Barbara Hill  
Director, President,

December 10, 2001

Florida Department of State  
Div. of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

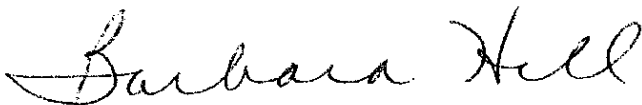
Re: Tami's Place Inc.  
Change of address  
Account # I19990000034

Greetings,

Please be advised that our address has changed from 13800 Alexandria Court, Davie, Florida 33325 to 8561 NW 52<sup>nd</sup> Street, Lauderhill, Fl 33351.

Please change your records to reflect that .....

Thank you

A handwritten signature in cursive script that reads "Barbara Hill".

Barbara Hill  
Director  
Tami's Place, Inc.  
Phone 954 578-2780

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