

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM **D**

CORPORATION
REINSTATEMENT



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

02 NOV 12 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000043913**

1. Corporation Name

Word of Mouth Advertising, Inc.

2. Principal Office Address

2445 Pigeon Cay

Suite, Apt. #, etc.

Suite 100

City & State

West Palm Beach

Zip

33411

Country

U.S.A.

3. Mailing Office Address

"

Suite, Apt. #, etc.

"

City & State

"

Zip

"

Country

4. Date Incorporated or Qualified
To Do Business in Florida

April 21, 2001

5. FEI Number

65-1109-022

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

Lucas Bancroft

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

2445 Pigeon Cay

Suite, Apt. #, Etc.

Suite 100

City

WEST PALM BEACH

State
FL

Zip Code

33411

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

[Signature]
REGISTERED AGENT MUST SIGN

Date **OCT 30, 2002**

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	Lucas Bancroft	2445 Pigeon Cay, suite 100	West Palm Beach, FL 33411
MI	"		
	"		
	"		
	"		
	"		

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT 30, 02 954.648.9162

Date

Daytime Phone #

CR2E081 (9/01)

Reinstatement of Word of Mouth Advertising, Inc.

Enclosed: Reinstatement document
Business check for \$150.00 to reinstate

We never received any information pertaining to the uniform business report to be filed by September. Recently we received a notice of dissolution of Corporation notice/reinstatement. This was a mistake. Upon contacting your office, we have been notified to send in this letter and a check for \$150.00 to reinstate our corporation. We thank you in advance for your cooperation and help in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'L. Bancroft', with a long horizontal stroke extending to the right.

Lucas Bancroft
President, Word of Mouth Advertising