PLEASE READ ALL INSTRUCTIONS REFORE COMPLETING THIS FORM



, LEAD READ ALE INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 03 JAN 13 AM 9: 22
DOCUMENT # PO 1 OC	1045/46	TALLAHA STEE, FLORIDA
SHEALEY'S LAWN	TALLAHAGERE, I LOMO	
Inc.	,	\$00013270275 02/28/0301045004 **300.00
2. Principal Office Address	3. Mailing Office Address	2222 2222 42
2/36 KeHle DRIVE Suite, Apt. #, etc.	2130 Kettle DRIVE	12012-2003 VB
	550,741.17,510	4. Date Incorporated or Qualified
City & State	City & State	To Do Business in Florida 5 8 0
Orlando FL ····	Orlando FL	59 - 3717 858 Applied For Not Applicable
32835 Orange	32835 Orange	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7- Name and Address of Current Registered Agent		
Name Chiniqua Shealey		
Street Address (P.O. Box Number is Not Acceptable)		
2134 Kette Deive Suite, Apt. #, Etc.		
City () State Zip Code		
"Brlando		FL 32835
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 Charles Supply Su		
Signature of Registered Agent Chere 4 Date 1/13/03		
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	
Pres. Chiniqua Shea	ley 2136 Kettle De	IVE ORlando FL 32835
V-Pres. Robert Shealey	- 2131-KoHlo-Do	IVE DRIANDO, FC 32835
i resiliente de la companya de la co		17 17 12 32033
10. I certify that I am an officer or director or the receive this reinstatement application, the reason for dissonance in the reaso	rer or trustee empowered to execute this application as p plution has been eliminated, the corporate name satisfies	rovided for in chapter 607 or 617, F.S. I further certify that when filing 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.

Chiniqua Shealin President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Florida Dept. of State Attn: Kathy Ashton 409 E. Gaines Street Tallahassee, FL 323999

Dear Kathy,

I am respectfully submitting this letter due to the fact that I inadvertently was unaware that I need to file a uniform business report annually. I have moved 2 times since we started this business, which is probably theoreason that I didn't receive any information from you all. How I became aware that I needed to contact you is becausew we won a city contract and they informed us that we could not sign it because our business was presently inactive so I called you. This is our first time ever having a business and we just had no idea.—When—Bispoke-withyyou onthe-other-day,—you—saidtto-overnight the\$300.00 along with a letter stating why I didn't receive the letter, and I'm more than sure that its because we've moved. We plan to be in business a long time so I will look forward to this information being requested of us. Please excuse us this time and accept our apologies.

Sincerely,

Chiniqua Shealey, President

Shealey's Lawn & Maintenance Services, Inc.