PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
02 OCT 30 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000063273

1. Corporation Name

SUBCONSCIOUS ENTERPRISES, INC.

Principal Place of Business	Mailing Address
461 RANGER ROAD #5 MARY ESTER FL 32569-2508	463 Rush Park Circle ~~461 RANGER ROAD #5~~ MARY ESTER FL 32569-2508

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. 463 Rush Park Circle
City & State	City & State Mary Esther FL
Zip / Country	Zip 32569 / Country OKaloosa

4. Date Incorporated or Qualified To Do Business in Florida 07/01/2001

5. FEI Number 59-3728160 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DP	POSTON, FRANK	463 RUSH PARK CIR.	MARY ESTER FL 32569
VSD	POSTON, TRACI L	463 RUSH PARK CIR.	MARY ESTER FL 32569

300008701363
10/30/02--01085--005 **150.00

8. Name and Address of Current Registered Agent

POSTON, DANELL M
17 OVERSTREET DRIVE
MARY ESTHER FL 32569

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City | State FL | Zip Code

CR2E040 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent SIGNATURE REQUIRED Date 10-24-02
REGISTERED AGENT MUST SIGN

11. 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 REQUIRED 10/24/02 850-581-2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Subconscious Enterprises, Inc.
463 Rush Park Circle
Mary Esther, Fl. 32569

This letter is in response to Notice / Document # 01000063273 received on 10/24/02.

Prior Uniform Business Reports were not received this year at my business address. I must assume that being my business began mid year 2001 it may be possible the notice was not generated for my corporation, or was not delivered by my mail carrier.

Throughout this past year I have had times my mail was not delivered due to it not being addressed to my business name"Giff's Sub Shoppe". I have since requested banking statements and other mailings sent with my corporate name be sent to my home address.

If the Department Of State will also accept my request for change of address and send future mailings to my above home address, this should clear up any future delays.

Thank-you for help in this matter.

Frank Poston,
Corporate Officer