





FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

P01000064591 DOCUMENT

1. Corporation Name

Principal Place of Business

3111 SOUTH DIXIE HWY.

GUY & MIKE SERVICES INC.

FILED

02 NOV 14 PH 5: 17

SECRETARY OF STATE

SUITE 222 12 1-WEST PALM BEACH FL 33405

3111 SOUTH DIXIE HWY. SUITE 222 1 2 1 -WEST PALM BEACH FL 33405

Mailing Address

|--|--|

V	CUTTING, MICHAEL J SR.		3111 SOUTH DIXIE HWY. STE.2	22	WEST PALM BEACH FL	33405
P	WATSON, GUY		3111 SOUTH DIXIE HWY. STE 2	22	WEST PALM BEACH FL	33405
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip	
	and Street Addresses of Each Officer and/	or Director (Flo	rida nonprofit corporations must list at le	ast 3 directors)		
2ip 334	10 Country SA	Zip	Country	6. CERTIFICAT	TE OF STATUS DESIRED (2) \$8.7	5 Additional Fee require r a Certificate of Status
City & State	t PALM Beach 71.	City & State				Not Applicable
	121			5. FEI Numb	er	Applied For
2. New Principal Office Address, If Applicable 3 11 South Dixle Hwy Suite, Apt. #, etc. 13		New Mailing Office Address, If Applicable Suite, Apt. #, etc.		Date Incorporated or Qualified To Do Business in Florida O6/22/2001		
	addresses are incorrect in any way, line thr					

P	WATSON, GUY	3111 SOUTH DIXIE HWY. STE 222	WEST PALM BEACH FL 33405	
V	CUTTING, MICHAEL J SR.	3111 SOUTH DIXIE HWY. STE.222	WEST PALM BEACH FL 33405	
		11.7	300008979448 14/0201010023 **158,75	

CUTTING, MICHAEL J SR. 3111 SOUTH DIXIE HWY. SUITE 200 12 WEST PALM BEACH, FL 33405

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

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

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:

FLORIDA DEPARTMENT OF STATE DIVISIONS OF CORPORATIONS P O BOX 6327 TALLAHASSEE, FL. 32314

To Whom It May Concern:

THIS CORPORATION HAS NEVER RECEIVED THE UBR NOTICES. PLEASE FIND ENCLOSED THE COMPLETED APPLICATION AND A CHECK IN THE AMOUNT OF 150.00 AS REQUESTED.

SINCERELY,

MICHAEL J. CUTTING

VICE PRESIDENT

GUY & MIKE SERVICES INC

GUY WATSON PRESIDENT

GUY & MIKE SERVICES