

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 OCT 26 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000065570

1. Corporation Name

FUN, INC.

2. Principal Office Address - No P.O. Box #

12189 US HIGHWAY 1

Suite, Apt. #, etc.

SUITE 49, PMB99

City & State

NORTH PALM BEACH, FL

Zip

33408

Country

USA

3. Mailing Office Address

12189 US HIGHWAY 1

Suite, Apt. #, etc.

SUITE 49, PMB99

City & State

NORTH PALM BEACH, FL

Zip

33408

Country

USA

REINSTATEMENT 04-09

4. Date Incorporated or Qualified
To Do Business in Florida

7/2/2001

5. FEI Number

651117797

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

DAVID H. RUBENSTEIN

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

12189 US HIGHWAY 1

Suite, Apt. #, Etc.

SUITE 49, PMB99

City

NORTH PALM BEACH

State

FL

Zip Code

33408

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

DAVID H. RUBENSTEIN

REGISTERED AGENT MUST SIGN

Date

10/18/09

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
P	DAVID H. RUBENSTEIN	12189 US HIGHWAY 1 SUITE 49, PMB99	NORTH PALM BEACH, FL 33408

500162183515
10/26/09--01064--018 **1500.00

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DAVID H. RUBENSTEIN

Date

Daytime Phone #

10/18/09 561-309-8279

JECK, HARRIS, RAYNOR & JONES, P.A.

Attorneys and Counselors at Law

Writer's Direct Line: (561) 746-1344 Ext. 328
Writer's E-Mail Address: SKOHN@JHRJPA.COM
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October 22, 2009

UPS

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Fun, Inc.
Document No. P01000065570

Dear Sir/Madam:

Enclosed regarding the above is Corporate Reinstatement form signed and dated by David H. Rubenstein, together with this firm's check in the amount of \$1,500, representing reinstatement fees. Of course, please feel free to contact us if you have any comments or questions.

Sincerely,


Stacy L. Kohn
Florida Registered Paralegal

/slk
enclosures