

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

05 MAY 26 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P0100074945*

1. Corporation Name

DG ACCEPTANCE CORP.

2. Principal Office Address

6625 MIAMI LAKES DRIVE

3. Mailing Office Address

SAME ADDRESS

Suite, Apt. #, etc.

#238

Suite, Apt. #, etc.

City & State

MIAMI LAKES FL

City & State

Zip

33014

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DAVID MAYER

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

13366 NW 16 ST.

Suite, Apt. #, Etc.

City

Pembroke Pines

State

FL

Zip Code

33024

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]

Date *3/3/05*

REGISTERED AGENT MUST SIGN

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
PRES	MICHELLE GOODNOUGH	6625 MIAMI LAKES DR	MIAMI LAKES, FL 33014

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:

Michelle Goodnough
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/27/05
305-909-3415
Daytime Phone #

May 31, 2005

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Re: W05000025380

Further to my telephone conversation with your office I am enclosing a check for Six Hundred Dollars (\$600.00) to cover the reinstatement fee for DG Acceptance Corp. 6625 Miami Lakes Drive, Suite 238, Miami Lakes, Florida 33014.

I am very sorry for the delay in reinstating this corporation. This was as a result of our relocating and not receiving the form in a timely manner. It would also be appreciated if the other applicable fees could be waived.

Sincerely,

DG ACCEPTANCE CORP.



Michelle M. Goodnough,
President.

MMG/mdm

Enclosures: 1. Check
 2. Reinstatement Application

May 31, 2005

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Sincerely,

DG ACCEPTANCE CORP.

Michelle M. Goodnough,
President.

MMG/mdm

Enclosures: 1. Check
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PS We did not receive any notice for the year 2002 and especially would like these fees waived.