

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 30 AM 8:48

DOCUMENT # PD1000089237

1. Corporation Name

WHITE FOX, INC

2. Principal Office Address

825 BAY BLVD

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PENSACOLA FL

Zip

Country

Zip

Country

32503

900023536719

10/03/03--01021--003 **308.75

4. Date Incorporated or Qualified
To Do Business in Florida

9/7/01

5. FEI Number

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$875 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RANSOME M. MAGER

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

825 BAY BLVD.

Suite, Apt. #, Etc.

City

PENSACOLA

State
FL

Zip Code

32503

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

Ransome M. Mager
REGISTERED AGENT MUST SIGN

Date

9/30/03

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	City / State / Zip
D	SUZANNE M. MAGER	825 BAY BLVD.	PENSACOLA, FL 32503
D	RANSOME M. MAGER	"	"

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:

Ransome M. Mager
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RANSOME M. MAGER

Date

9/30/03

Daytime Phone #

850-434-3804

WHITE FOX, INC
D/B/A GREY GOOSE
825 Bay Blvd.
Pensacola, FL 32503
850-434-3804

Department of State
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

To whom it may concern:

Please accept the enclosed check as full payment for reinstating White Fox, Inc. to active corporate status.

It seems that an incorrect mailing address is the reason that we have not received any notice of the monies due. Please change the mailing address to:

White Fox, Inc.
D/B/A/ Grey Goose
825 Bay Blvd.
Pensacola, FL 32503

Sincerely,


Ransome M. Mager
Director

Att.: Check #1008
\$308.75