

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

payeloh

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000097147

1. Corporation Name

THE J. RILEY GROUP, INC.

Principal Place of Business

1435 OLD MISSION RD.
NEW SMYRNA BEACH FL 32168

Mailing Address

1435 OLD MISSION RD.
NEW SMYRNA BEACH FL 32168

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/03/2001

5. FEI Number

59-3757002

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)

Title(s)
1

Name of Officers
and/or Directors
2

3

Street Address of Each
Officer and/or Director

4

City / State / Zip

DPST

WENTWORTH, STEVEN P

1435 OLD MISSION RD.

NEW SMYRNA BEACH FL 32168

400008935174
11/12/02--01074--005 **150.00

11/02/02 UBR

8. Name and Address of Current Registered Agent

WENTWORTH, STEVEN P
1435 OLD MISSION RD.
NEW SMYRNA BEACH FL 32168

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

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
REGISTERED AGENT MUST SIGN

Date *10/24/02*

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/24/02 386-428-0213

CR2E040 (8/02)



J. Riley Group, Inc
1435 Old Mission Road
New Smyrna Beach, FL 32168

web site: <http://j-riley.com>
email: info@j-riley.com
Phone: (386) 428-0213
Fax: (386) 428-4020

State of Florida
Florida Dept of State

To whom it may concern,

This letter is a request for waiver of the reinstatement fee because I did not receive the UBR notices.

I just started this corporation in October of 2001 and did not know that annual filing were required. Not receiving the notices, I did not know to file.

If there are any additional questions, please do not hesitate to contact me at 386-428-0213.

Sincerely,

A handwritten signature in black ink, appearing to read 'Steven P. Wentworth', is written over a horizontal line.

Steven P. Wentworth
President
The J. Riley Group