

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 25 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000098574

1. Corporation Name

JJJ CONSULTING, INC.

Principal Place of Business

9765 NW 63RD PLACE
PARKLAND FL 33076

Mailing Address

9765 NW 63RD PLACE
PARKLAND FL 33076

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

09/17/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. FEI Number

05-1144784

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	JON J JOHNSON	9765 NW 63RD PL	PARKLAND, FL 33076

900008596129
10/25/02--01076--023 **150.00

8. Name and Address of Current Registered Agent

JOHNSON, JON J
9765 NW 63RD PLACE
PARKLAND FL 33076

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]

REGISTERED AGENT MUST SIGN

SIGNATURE REQUIRED

Date

22 OCT 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

22 OCT 02 954-255-6663

JJJ Consulting, Inc.
Innovations in Computing Solutions

State of Florida
Department of State
Division of Corporations
Annual Report/Reinstatement Section

This letter is to attest that the prior UBR notices were not received.



Jon J. Johnson

from the office of **Jon J. Johnson CEO**
JonJohnson@JJJConsultingInc.com
9765 NW 63rd Place Parkland, FL 33076
(954) 255-6663 fax (954) 755-3216