PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	Secretar	TMENT OF STATE y of State orporations	05	5 NOV	ILED 15 PH			
DOCUMENT # PO1000108291 1. Corporation Name			SEGNITALM LA STATE TAULATA STOT, ELGADA					
Envy Enterprises, Inc.								
2. Principal Office Address \$983 Okeachobee Bluz.	3. Mailing Office Address 8983 Oke	Okechobee Blud.		CR2E081 (8/05)				
		4. Date I		orated or C	Qualified 1 1	18/01		
City & State West Palm Beach, FL West		Palm Beach, FL 03		, 5385	1385	Apr Not	plied For t Applicable	
33411 USA	33411	Country	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee for a Certificate of			Fee required e of Status		
7. Name and Address of Current Registered Agent								
Name Mark L. Pateman, Esq. Street Address (P.O. Box Number is Not Acceptable) 3/2 Clematis Street								
Suite Apt. #, Etc. Suite 403 City West Palm Beach				State FL	zip Code 334c	o /		
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 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			
PD Rebecca Schu	D Rebecca Schulze 1469 Stanehaven Est			ates Dr. Westlalm Beach, FL 33411				
			11/3	2/05-	-01089	018 **1	243.75	
	RESIDENCE OF THE PROPERTY OF T			ENER 102-05				
					. 			
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: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #								

Mark L. Pateman Esquire

November 14, 2005

VIA UPS

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

Re: Envy Enterprises, Inc./P01000108291

Dear Sir/Madam:

Enclosed please find the fully executed reinstatement form, the change of registered agent form, and a check in the amount of \$1,243.75 for all fees including a certificate of status.

Thank you for your time and attention to this matter and please call me at 561-835-9471 if there are any problems or questions.

Yours very truly,

Mark L. Pateman

Enclosures

312 Elomatis Street, Suite 403 West Palm Beach Florida 33401 Telephone (561) 835-9471 Iacsimile (561) 835-1446

patemanm@bellsouth.net