

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 18 PM 12:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PD200007693

1. Corporation Name

Coin Laundry #3, Inc

2. Principal Office Address

2400 E Las Olas Blvd

3. Mailing Office Address

2400 E Las Olas Blvd

Suite, Apt. #, etc.

#271

Suite, Apt. #, etc.

#271

City & State

Ft Lauderdale FL

City & State

Ft Lauderdale

Zip

33301

Country

Broward

Zip

33301

Country

Broward

REINSTATEMENT

03

MRS

4. Date Incorporated or Qualified
To Do Business in Florida

2/15/2002

5. FEI Number

04-3620948

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Daniel Wiesel

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

2400 E Las Olas Blvd

Suite, Apt. #, Etc.

#271

City

Ft Lauderdale

State

FL

Zip Code

33301

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

12/15/03

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
D	Daniel Wiesel	2400 E Las Olas Blvd #271	Ft Lauderdale, FL 33301
D	Alysa Wiesel	2400 E Las Olas Blvd #271	Ft Lauderdale, FL 33301

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

12/15/03
Date

954/467-6650
Daytime Phone #

CR2E081 (10/02)

282

COIN LAUNDRY #3, INC.

2400 E. Las Olas Blvd., #271
Ft. Lauderdale, FL 33301

Hand Delivery

December 17, 2003

Department of State
Division of Corporations
409 East Gains Street
Tallahassee, FL 32399

RE: COIN LAUNDRY #3, INC.

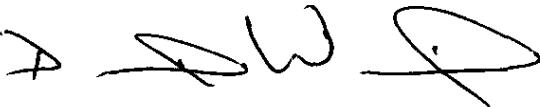
Dear Sir or Madam:

Please be advised that we did not receive our 2003 Annual Uniform Business Report. Our correct address is 2400 E. Las Olas Blvd., #271, Ft. Lauderdale, FL 33301.

Please accept this \$158.75 to reinstate and issue a Certificate of Good Standing.

Thank you,

COIN LAUNDRY #3, INC.



Dan Wiesel, President

RECEIVED
03 DEC 18 PM 12:10
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA