| REINSTAT   |   | Secret   | RTMENT OF STAT   |  | FILED<br>4 JUN 14 MII: 10  | 0                                  |  |
|--|---|--|--|--|--|------------------------------------|--|
| DOCUMENT # P0200030263   |   |  |  |  | SECRETARY OF STATE<br>TALLAHASSEL, FLORIDA   |                                    |  |
| Corporation Narr   | ACP Der   | relopme  | nt, Inc.   |  |  | ·                                  |  |
| Principal Office /   | Address   | 3. Mailing Office Ad   | dress  |  |  |                                    |  |
| 240 K  | Néwport CTR   |  |  |  |  |                                    |  |
| te, Apt. #, etc.   | •   | Suite, Apt. #, etc.  |  | 4. Date Incorporat   |  |                                    |  |
| & State  |   | City & State   |  | 5. FEJ Number  |  | Applied For                        |  |
| )eenti   | ed Beach<br>Country   | Zip  | Country  | - <u>  75-36</u>   | 62853  | Not Applicable                     |  |
| 23442  | AZU   | SAme   | SAMÉ   |  |  | nal Fee required<br>cate of Status |  |
|  | Address (P.O. Box Number is I   | J. SAM   | ple R  |  | 318<br>tate Zip Code   | _                                  |  |
| Suite,<br>City<br>1, being appointe<br>nature of   | Apt. #, Etc.  | Spring   | am familiar with and accept t  | F  | 133065   | CR2E081 (01/04)                    |  |
| Suite,<br>City<br>I, being appointe<br>nature of<br>gistered Agent                             | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar  | D, SAM<br>Spring<br>ove named corporation, a<br>HEGISTERED AGENT MA                                      | am familiar with and accept t<br>UST SIGN  | ne obligations of section 6  | E 33065  | Ch2E081 (01/04)                    |  |
| Suite,<br>City<br>I, being appointe<br>nature of<br>gistered Agent                             | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar<br>Name of<br>Officers and/or Director                 | Spring<br>ove pamed corporation, a<br>HEGISTERED AGENT MU<br>IND/or Director (Florida noi<br>s           | am familiar with and accept t<br>UST SIGN<br>nprofit corporations must list<br>Street Address of<br>Officer and/or Dir   | at least 3 directors)  | E 33065   07.0505 or 617.0503, F.S.   Date   G   City / State / Zip  | CR2E081 (01/04)                    |  |
| Suite,<br>City<br>I, being appointe<br>nature of<br>gistered Agent<br>Names and Stra<br>Fitles | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar<br>Name of<br>Officers and/or Director                 | Spring<br>ove pamed corporation, a<br>HEGISTERED AGENT MU<br>IND/or Director (Florida noi<br>s           | am familiar with and accept t<br>UST SIGN<br>nprofit corporations must list<br>Street Address of<br>Officer and/or Dir   | at least 3 directors)  | E 33065<br>07.0505 or 617.0503, F.S.<br>Date 6 10 04   | CR2E081 (01/04)                    |  |
| Suite,<br>City<br>I, being appointe<br>nature of<br>gistered Agent<br>Names and Stra<br>Fitles | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar<br>Name of<br>Officers and/or Director                 | Spring<br>ove pamed corporation, a<br>HEGISTERED AGENT MU<br>IND/or Director (Florida noi<br>s           | am familiar with and accept t<br>UST SIGN<br>Inprofit corporations must list<br>Street Address of<br>Officer and/or Dir<br>HO É, NCW   | at least 3 directors)<br>Each<br>Port CTR (  | E 33065<br>D7.0505 or 617.0503, F.S.<br>Date 6 10 04<br>City / State / Zip<br>DecrField Deb  | CR26081 (01/04)                    |  |
| Suite,<br>City<br>I, being appointe<br>nature of<br>gistered Agent<br>Names and Stra<br>Fitles | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar<br>Name of<br>Officers and/or Director                 | Spring<br>ove pamed corporation, a<br>HEGISTERED AGENT MU<br>IND/or Director (Florida noi<br>s           | am familiar with and accept t<br>UST SIGN<br>UST SIGN<br>Inprofit corporations must list<br>Street Address of<br>Officer and/or Dir<br>HO É. NUM   | at least 3 directors)<br>Each<br>actor<br>Port CTK (<br>A HULLEREL 1)  | E 33065<br>D7.0505 or 617.0503, F.S.<br>Date 6 10 04<br>City / State / Zip<br>Deerfield Beh<br>= 03-04   | इ <u>उ</u> षपर्                    |  |
| Suite,<br>City<br>I, being appoints<br>nature of<br>gistered Agent<br>Names and Str<br>Titles  | Apt. #, Etc.<br>CONAL<br>ed the registered agent of the ab<br>Set Addresses of Each Officer ar<br>Name of<br>Officers and/or Director<br>NAAY D Molyy | Spring<br>Spring<br>ove named corporation, a<br>HEGISTERED AGENT MI<br>rat/or Director (Florida nor<br>s | am familiar with and accept the second secon | e obligations of section 6<br>A<br>at least 3 directors)<br>Each<br>sctor<br>Port CTK<br>Port CTK<br>A R La RUBLE<br>E DIC<br>OT / OC/ O | E 33065<br>D7.0505 or 617.0503, F.S.<br>Date 6 10 04<br>City / State / Zip<br>Deerfield Beb<br>= 03-04<br>= 03-04<br>= 03-04<br>= 03-04<br>= 03-04<br>= 03-04<br>= 03-04<br>= 03-04<br>= 01027-003 **903 | 339442<br>375                      |  |