

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1422

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 DEC -1 PM 2:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000050566

1. Corporation Name

Judah Design & Digital Studio, Inc.

2. Principal Office Address

P.O. Box 6191

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32314

Country

U.S.

3. Mailing Office Address

P.O. Box 6191

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32314

Country

U.S.

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

May 8, 2002

5. FEI Number

03-0439273

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

Jacob Rutherford

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

2900 Gulf Wind Dr. W.

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

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]*

REGISTERED AGENT MUST SIGN

Date

12/1/04

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
CEO	Jacob Rutherford	2900 Gulf Wind Dr. W.	Tallahassee / FL / 32303
COO president	Joshua Rutherford	2020 Centinental Ave	Tallahassee / FL / 32304

4000043673284  
12/28/04-01039-006 \*\*300.00

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)(f), 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]*

Jacob Rutherford

12/1/04

(850) 264-7805

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date


Daytime Phone

2012

To whom it may concern,

for the 2002 - 2003, JDDS, Inc.  
did not receive the annual Report.

Thank you,

  
CEO