PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **CORPORATION** 2008 NOV 26 PM 1:58 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS TALLAHASSEE, FLORID: DOCUMENT # P02000066532 £ 1. Corporation Name Leonard Hamilton Basketball Camp, Inc. 700138286487 11/26/08--01028--008 **150.00 + 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 2900 S.W. 28th Terrace 2900 S.W. 28th Terrace CR2E081 (10/08) Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida 06/14/2002 5th Floor 5th Floor City & State City & State 5. FEI Numbe Applied For Miami, FL Miami, FL 04-3718627 Not Applicable Zip Country Country \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED 33133 USA 33133 USA for a Certificate of Status 7. Name and Address of Current Registered Agent The reinstatement fee is imposed, except in Nicholas E. Christin circumstances which the entity did not receive Street Address (P.O. Box Number is Not Acceptable) the prior notices. By checking this box, you 2900 S.W. 28th Terrace are certifying the prior notices were not Suite, Apt. #, Etc. received and requesting the reinstatement 5th Floor fee be waived. Zip Code 33133 Miami 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 Date 11/04/2008 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) Street Address of Each Officer and/or Director Name of Officers and/or Directors Titles City / State / Zip D J. Leonard Hamilton 2900 S.W. 28th Terr., 5th Fir. Miamı, FL 33133 10. I cartify 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 filling 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 contained in Chapter 119, F.S. The information indicated on this application is true and accidente, and my signature shall have the same legal effect as if made under oath. //-16-68 J. Leonard Hamilton SIGNATURE: SIGNING OFFICER OR DIRECTOR