

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 MAY 11 PM 12:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000076090

1. Corporation Name

S&M Southeast, Inc

2. Principal Office Address

954 Wildwood Dr

Suite, Apt. #, etc.

City & State

Melbourne FL

Zip

32940

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Same

Zip

Same

Country

REINSTATEMENT 03-05

4. Date Incorporated or Qualified
To Do Business in Florida

7/2002

5. FEI Number

59-3481626

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

Stephen P. Maricle

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

954 Wildwood Dr

Suite, Apt. #, Etc.

400054860284

05/19/05--01056--021 ***450.00

City

Melbourne

State

FL

Zip Code

32940

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of
Registered Agent

Stephen P. Maricle
REGISTERED AGENT MUST SIGN

Date

4/16/05

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
PRES.	STEVE MARICLE	954 WILDWOOD DR.	MELBOURNE, FL 32940
CO-PRES.	SUSAN MARICLE	↓	↓
			025118

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:

Stephen P. Maricle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN P. MARICLE 4/16/05

Date

321-242-2107

Daytime Phone #

CR2E031 (01/05)

TO: Florida Dept. of State - Division of Corporations
FROM: Susan Maricle / S&M Southeast, Inc (59-3481626)
DBA: Susan's Birkenstock Shoes

4-18-05

Enclosed is a check for \$450.00 for reinstatement of our corporation. We did not dissolve and were unaware it became inactive, as we did not receive postcard notification for annual report since 2003. I would greatly appreciate if late fees could be waived.

Thank you,
Susan Maricle
954 Wildwood Dr
Melbourne, FL 32909
321 - 242 - 2107