PLEASE/READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

FILED

04 JAN 14 AM 8: 35

DOCUMENT # PO2000081772 1. Corporation Name

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Daytime Phone #

	Ċ	JS Building	Corpora	ation						
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2. Principal Office Address 3. Mailin				Office Addres	ss THE	is et a	TEME	TLA		
13058 Tall Tree Drive 1015				Office Address Atlantic Blvd.						
Suite, Apt. #, etc. Suite, Apt.				etc.					0 / 0	
Su:				e 111		4. Date Incorporated or Qualified To Do Business in Florida				
City & State City & St					****	July 29, 2002				
	onvil	le, FL	Atlantic Beach, FL			5. FE! Number 46 – 048		-	Applied For Not Applicable	
Zip		Country	Žip		Country	6.	30001	50.75		
3224	6	USA	32	233	USA	CERTIFICATI	E OF STATUS DESIR	ED 58.75 Add for a Cel	itional Fee required rtificate of Status	
-		. , .	7. 1	ame and A	ddress of Current Registe	red Agent	,			
***	Name	,	· · · · · · · · · · · · · · · · · · ·							
'	26	John A. Sudda					darth .			
1.3	Street Address (P.O. Box Number is Not Acceptable)									
3 3	Suite, Apt. #, Etc								STATE STATE OF	
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	Jacksonville FL 32246								articular in submitted to the file.	
8. I. being	appointed the				amiliar with and accept the o	bligation of a sti				
		- In the last	- A A	· •	amiliai with and accept the c	ibligations of secti	30 607,0505 or 617	7.0503, F.S.		
Signature of Registered		John .	<u>0 S N</u>	ather		<u></u>	_{Date} 1/0	5/04		
		O RI	GISTERED AG	ENT MUST	SIGN					
9. Names	and Street Ad	idresses of Each Officer and	/or Director (Flo	rida nonpro	fit corporations must list at le	east 3 directors)				
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip			
Sec.	Donna-M-Suddarth			13058 Tall Tree Drive S. Jacksonville,				EI=- 3.2 2:4:4		
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owed b	y the corporati application is t	plication, the reason for diss ion have been paid and the	olution has been names of individ	eliminated, uals listed o	execute this application as in the corporate name satisfies in this form do not qualify for begal effect as if made under the corporate in the	the requirements an exemption and	of section 607.040 er section 119.07(3	11 or 617 0401 E.C.	., that all fees nation indicated	
		NATURE AND TYPED OR PR	NTED NAME OF S	IGNING OFF	ICER OR DIRECTOR		Date 2017	Davlime Pho		