## PLEASÉ READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION  FLORIDA DEPARTMENT OF STATE  Secretary of State							FILED					
REIN	STATEM	ENT				ORPORATION	s		06	JAN 11	PH 4:31	
DOCUMENT # P03000105890								SECRETARY OF STATE TALLAHASSEE, FLORIDA				
1. Composition Name									TAL	Lahassi	E. PLURIUA	
J & J FLOYD, INC.												
2. Principal Office Address 3. Mailing					Office Address			l			.,	
215 Fernwood St.					215 Fernwood St.				TATER	验验	04-05	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				4. Date Incom	orated or Qualified			
City & State				City & State				5. FEI Numbe		09-2	6-03 Applied For	
Leesburg, FL			Leesburg, FL				54-2127500 Not Applicable					
<sup>Zip</sup> 34748	8	Country	USA	34748		Country U	SA	6. CERTIFICATE	OF STATUS DESIR		Additional Ego required Continuate of Status	
7. Name and Address of Current Registered Agent												
	Name Jason B. Floyd											
	Street Address (P.O. Box Number is Not Acceptable)											
	215 Fernwood St. Suite, Apt #, Etc.							900064014849 0171970601007011 ***30*.75				
	City								State Zip Code			
	Leesburg								FL 34748-7105			
<b>8.</b> I, being	appointed the	e register	ed agent of the ab	ove named corp	oration, am	familiar with and	d accept the of	bligations of secti	on 607.0505 or 617	7.0503, F.S.		
Signature of Registered Agent Jason B. F.							. Floy	rd				
				EGIŚTERED A				·····				
	and Street A	and Street Addresses of Each Officer and/or Director (Florkta nonprofit corporations must list a										
Titles	Name of Officers and/or Directors		Street Address of Eac Officer and/or Direct									
P/T/ D	Jason B. Floyd				215 Fernwood St.			Leesburg, FL 34748				
V/S/	Jack D. Floyd			215 Fernwood S						34748		
D	Jack	D. I	rioya	<u> </u>	213	rernwo	od St.		Leesbu	rg, ru	34/40	
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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 fitting										ify 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												
			accurate, and my									
SIGNA	TURF.	1	/	The said	J	ason B	. Floy	d /-8	7-06	352.40	8.7841	
		ENATURE	AND TYPES OR P	RUNTED MAME OF					Date		Phone #	

## J & J FLOYD, INC.

215 Fernwood St., Leesburg, FL 34748-7105 Jason 352.408.7841 ~ Jack 407.947.3472

January 6, 2006

Department of State **Division of Corporations** PO Box 6327 Tallahassee, FL 32314 850.245.6059

Re:

Document No. P03000105890

J & J FLOYD, INC.

Dear Madam or Sir:

We have just discovered the delinquent status of our corporation. We had no knowledge of this previously and no intent for this to occur. Apparently this resulted from our failure to file the annual report in 2004. We hereby state that we never received that or any Annual Report Notices from your office. We have checked back through all our records and, although inexplicable in that nothing has changed since our original filing, it was never received. Therefore, we implore the Division to waive the reinstatement fee in this instance.

Enclosed is our application for Corporation Reinstatement, along with our check in the amount of \$308.75 as follows:

Annual Report Fee 2004	\$61.25
Annual Report Fee 2005	61.25
Corporate Supplemental Fee 2004	88.75
Corporate Supplemental Fee 2005	88.75
Certificate of Status	8.75
TOTAL Enclosed	\$308.75

Additionally, we request that the 2006 Annual Report Notice be forwarded as soon as possible. In the event this form is not received within 60 days, we will contact your office in order to comply by May 1, 2006.

Thank you very much for your consideration in and assistance with this matter.

Respectfully,

ason B. Floyd

President