PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATI	5 0 Brok L40	Se	ORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			FILED 11 JUL 19 PH 1:50			
1 ^	-0 NI	# P03000			ac		S F/N	ECHETARY C E CHANSS E	OF STATE : PL ORHOA	
2. Principa	al Office Addre	ess - No P.O. Box #	3. Mailing Offi	3. Mailing Office Address						
2565 TWAN DE			SA	Same						
Suite, Apt. #, etc.			Suite, Apt. #, et	Suite, Apt, #, etc.			CR2E081 (11/10) 4. Date incorporated or Qualified			
City & State			City & State	City & State			To Do Busin	ess in Florida / /	24 2003	
TAIIA HASSEE FL				Some			5. FEI Number Applied For Not Applied For Not Applicable			
Zip 323	·) (Country USA	Zip San	ne	Country Sam	e	6	E OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
	• •	7. Name and Addres	s of Current Registe	ered Agent						
Name William h.Faulkwar III Street Address (P.O. Box Number is Not Acceptable) 5565 TWAIN DR Suite, Apt. #, Etc.							000210153340 07/19/1101022021 **1200.00			
City 77	-11 A H	assee			—	Code 311				
8. t, being Signature o Registered	of /	e registered agent of the	\mathcal{O}^{ϵ}	ation, am fa	9B	accept the ob	oligations of sections	on 607.0505 or 617 050		
9. Names	s and Street A	ddresses of Each Office	and/or Director (Flon	ida nonprof	fit corporations	must list at lea	ast 3 directors)	11		
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip		
P	William L Fackers			2565 TWAIN DE TAII, FC 32311				TA1, FC 32311		
		F	REINS	TA	FEM	EN	r .			
	08-11									
	RH									
10. E-mail Address: WM faulkwer & Concast, Net										
reinstat owed b if made	tement application the temperature to the temperatu	tion, the reason for disso on have been paid. I fur am eware that false info	olution has been elimin ther certify, the information	npowered to nated, the c ation indica document	p execute this a corporate name ated on this appl to the Departm	pplication as satisfies the r lication is true ent of State of	provided for in the equirements of se and accurate, and onstitutes a third of	ction 607 0401 or 617 i d my signature shall ha	ヘー グアノウムヘイ	