PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF Secretary of State Division of corporations			State	STATE	FILED 10 MAR 24 AM 11: 42			
DOCUMENT # 1. Corporation Name								SCHOOL STE LORIDA			
eLease International, Inc Doc #P0400004576											
2. Principal Office Address 23139 SW 5	3. Mailing Office Address 23139 SW 54th Ave Suite, Apt. #, etc.				700173045477 03/24/1001035021 **600.00 REINSTATEMENT ⁹⁾ のフーし						
Suite, Apt. #, etc.			Suite, Apr. 11,	€C.				4. Date Incorp	orated or Qualified	d 07_2(
City & State Boca Rato	City & State Boca Raton, FL					To Do Business in Florida 05-07-2002 5. FEI Number Applied For					
Zip	Country	'	Zip	Zip				73-16407 6.		→ \$8.75	Not Applicable Additional Fee required
33433	USA	 	33433		USA			CERTIFICATE OF STATUS DESIRED 30.13 Additional Fee required for a Certificate of Status			
7. Name and Address of Current Registers Name Thomas Clyce Street Address (P.O. Box Number is Not Acceptable) 23139 SW 54th Ave Suite, Apt. #, Etc. City Boca Raton					State	3343	Code	☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
I, being appointed the Signature of Registered Agent	e registere	LA	ove named corpor				ccept the ob	oligations of section	_	7.0503, F.S. - 22 -	10
9. Names and Street A	Addresses	of Each Officer and	d/or Director (Flo	orida nonpro	 -		•				
Titles	Officer	Name of s and/or Directors					ress of Each I/or Director			City / State /	/ Zip
CEO Tho	CEO Thomas Clyce			23139 SW 54th A				Ave	Boca R	laton,	FL 33433
											·
						· · · · · · · · · · · · · · · · · · ·		-			
										 	
^{10.} E-mail Addres	ss: ldy:	ce@eleaseint	emational.c		ha user	for future i		t notification)			
11. I certify that I am an this reinstatement ap owed by the corporat made under oath. SIGNATURE:	optication, ti	the reason for disactive peon parts. I further the	oflution has been o	mpowered to eliminated, t matter tridica	o execut , the corp ated on t	ite this appl porate nam this applica	olication as p ne satisfies t ation is true	provided for in char the requirements of and accurate, and	of section 607.040 d my signature sha)1 or 617.0401,	, F.S., that all fees