

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 SEP 29 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200212704572
09/29/11--01010--016 **1650.00

DOCUMENT # P04000043037

1. Corporation Name

Bee, Inc

2. Principal Office Address - No P.O. Box #

661 Tomlinson Terrace

Suite, Apt. #, etc.

3. Mailing Office Address

661 Tomlinson Terrace

Suite, Apt. #, etc.

City & State

Lake Mary, Florida

City & State

Lake Mary, Florida

Zip

32746

Country

USA

Zip

32746

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified

To Do Business in Florida 3/2/04

5. FEI Number

20-0847094

☐ 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

Robert T. Duross Jr.

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

1425 Brushed Dune Circle

Suite, Apt. #, Etc.

City

Freeport

State

FL

Zip Code

32439

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date September 26, 2011

REGISTERED AGENT MUST SIGN

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
P	Robert T. Duross Jr.	1425 Brushed Dune Circle	Freeport, Florida 32439

10. E-mail Address: bob.duross@tcelectric.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

ROBERT T. DUROSS JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

September 26, 2011 850-835-4741

Date

Daytime Phone #