PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORA REINSTATI		ſ;				DA DEPAR Secreta DIVISION OF	ry of S		1	08 APR 14 AM 9: 59 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMEI		PC	 500(J161	472				\	ALLANASSEL
IFG Investments, Inc.								RINE	RENSTHENENTOOS	
2. Principal Office A						ng Office Addr			(12716	March March 19
1560 Sawgras	s Corpo	orate	∍ Pkwy			Sawgrass (Corpor	ate Pkwy		CR2E081 (12/07)
Suite, Apt. #, etc. 4th floor					Suite, Apr				4. Date Incorp	porated or Qualified
City & State					City & Str					ness in Florida 12/09/2005
Sunrise, Florid	la				1	e, Florida			5. FE: Numbe 20-391021	
Zip		untry			Zip		Coun	try	6	50.75
33323	US	3A			33323		USA	١	CERTIFICATE	FOR STATUS DESIRED of Status
	7.	Name	and Ad	dress o	Current R	legistered Ag	ent			
Name Joseph J. Tay	dor	_							• • • •	instatement fee is imposed, except in
Street Address (P.C	D. Box Nun				·)					stances which the entity did not receive or notices. By checking this box, you
1560 Sawgras	s Corpo	orate	∍ Pkwy	<u>/</u>					are ce	ertifying the prior notices were not
Suite, Apt. #, Etc. 4th floor							77-1-	T 0-4-		ed and requesting the reinstatement waived.
Sunrise							FL	Zip Code 33323		
8. I, being appointe	ad the regit	istered	agent of	the abo	ve named c	orporation, ar	n familiar	with and accept the	e obligations of section	on 607.0505 or 617.0503, F.S.
Signature of Registered Agent					NA					non 1/2008
Registered Agent REGISTERED AGENT MUST SIGN									Date (
9. Names and Stre	aet Addres	sses o	f Each Of	ficer any	dior Directò	r.(Florida non	orofit corp	orations must list a	it least 3 directors)	
Titles	Of		Name of and/or D					Street Address of E Officer and/or Direc		City / State / Zip
P/D Josep	Joseph J. Taylor					1560	Sawgr	ass Corporat	te Pkwy 4th	Sunrise, Florida, 33323
									04/14/0 —— 3:D £	801003027 **1050.00 1123201418
									04/14/0	B01003027 **1050.00
this reinstateme owed by the co	ent application has true a	ation, th have b	he reason een paid	n for diss and the	solution has names of in	i been eliminati ndividuals lister	ted, the co ed on this f	prograte name satist	sfies the requirements for an exemption con	apter 607 or 617, F.S. I further certify that when filling s of section 607.0401 or 617.0401, F.S., that all fees attained in Chapter 119, F.S. The information indicated