


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT 2010 AR	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
--	--

DOCUMENT # P06000136122

1. Corporation Name

Solaris Realty Group, Inc

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

3523 Pintail Drive South

Suite, Apt. #, etc.

City & State

Jacksonville Beach, FL

Zip

32250

Country

USA

3. Mailing Office Address

3523 Pintail Drive South

Suite, Apt. #, etc.

City & State

Jacksonville Beach, FL

Zip

32250

Country

USA

4. Date Incorporated or Qualified
to Do Business in Florida

10/26/2006

5. FEI Number

20-5782623

☐ 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 S Patton

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

3523 Pintail Drive South

Suite, Apt. #, Etc.

City

Jacksonville Beach, FL

State

FL

Zip Code

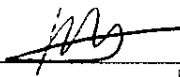
32250

☒ 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.

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 **12-22-09**

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
VPD	Kimberly Patton	3523 Pintail Drive South	Jacksonville Beach, FL 32250

10. E-mail Address: patton.kim@gmail.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., 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.

SIGNATURE:



Robert Patton

12-22-09 904-249-2200

FILED

10 JAN -4 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300164723153

~~888163541020~~

12/28/09--01001--003 **150.00

CR2E081 (11/09)

1/4/10