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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 MAR 28 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P08000080722

1. Corporation Name

Plantit Exotic Locators Inc.

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

2503 OAK LANDING

Suite, Apt. #, etc.

3. Mailing Office Address

2503 OAK LANDING Dr

Suite, Apt. #, etc.

City & State

Brandon FLA.

City & State

Brandon FLA.

Zip

33511

Country

USA

Zip

33511

Country

USA

200199541532
03/28/11--01054--009 **908.75

CR2B081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEL Number

26-3242416

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

Tina Reel

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

2503 OAK LANDING Dr

Suite, Apt. #, Etc.

City

Brandon

State

FL

Zip Code

33511

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

Tina R. Reel

REGISTERED AGENT MUST SIGN

Date 3-24-11

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
Pres VP	Tina Reel	2503 OAK LANDING	Brandon FL 33511
			72 3/29/11
			10-11
			REINSTATEMENT

10. E-mail Address: plantit exotic locators@yahoo.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:

Tina R. Reel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-11

Date

Daytime Phone #