

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 NOV -1 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P10000095456

1. Corporation Name

DAKOTA TELECOMMUNICATIONS, INC.

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

1221 Brickell Avenue

3. Mailing Office Address

1221 Brickell Avenue

Suite, Apt. #, etc.

Suite 2660

Suite, Apt. #, etc.

Suite 2660

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33131

Country

USA

Zip

33131

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified

To Do Business in Florida **11/22/2010**

5. FEI Number

75-3077048

☐ 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

Ronald T. Bevans, Jr.

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

1221 Brickell Avenue

Suite, Apt. #, Etc.

Suite 2660

City

Miami

State

FL

Zip Code

33131

300213874253
11/01/11--01029--003 **750.00

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

Ronald T. Bevans, Jr.

Date **10/26/2011**

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	Ronald T. Bevans, Jr.	1221 Brickell Avenue # 2660	Miami, Florida 33131

REINSTATEMENT

B 11/2/11

10. E-mail Address: **rtbevans@bevanslaw.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 by a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Ronald T. Bevans, Jr.

10/26/2011

305-374-7535

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #