

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

17 DEC 27 PM 2:46

DOCUMENT # P11000081216

1. Corporation Name

SPRIM AMERICAS, INC.

300307102863
12/27/17--01016--009 **750.00

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

12000 RESEARCH PARKWAY

Suite, Apt. #, etc.

SUITE 132

City & State

ORLANDO

Zip

32826

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

FL

Zip

Country

CR28081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

09/14/2011

5. FEI Number

45-5132380

☐ 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

CORRIDOR LEGAL, CHARTERED

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

325 5th Avenue

Suite, Apt. #, Etc.

SUITE 103

City

INDIALANTIC

State

FL

Zip Code

32903

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 12/21/17

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
MR	IVAN JARRY	254 FRONT STREET, PH	NEW YORK, NY 10038

10. E-mail Address: IVAN.JARRY@SPRIM.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: IVAN JARRY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/21/17

Date

415-994-6363

Daytime Phone #



January 11, 2018

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: SPRIM Americas, Inc.
Document number P11000081216

To Whom It May Concern:

We have spoken with Rebecca White in the revocation department and she advises the Articles of Dissolution for SPRIM Americas, Inc., document number P11000081216 have been revoked.

Please find enclosed the original Corporation Reinstatement filing paperwork for this corporation for processing.

Thank you for your assistance.

Ivan Jarry
Managing Partner

IJ/rls

Enclosure



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2017

SPRIM AMERICAS, IMC.

12000 RESEARCH PARKWAY., SUITE 132
ORLANDO, FL 32826

SUBJECT: SPRIM AMERICAS, INC.
Ref. Number: P11000081216

We have received your document for SPRIM AMERICAS, INC. and your check(s) totaling \$750.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above referenced entity was voluntarily dissolved. There is no provision in the Florida Statutes for reinstating a voluntarily dissolved entity. Therefore, we are returning your reinstatement along with the forms and instructions for you to form a new entity.