· PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT P - 11000084223	FILED 13 JUL -2 AM IO: 11 SECRETARY OF STATE
1. Corporation Name JM2 ENTERPRISE, INC	TALLAHASSEE, FI ORIDA
2. Principal Office Address - No P.O. Box# 4943 E. BUSCH BLVD 4943 E. BUSCH BLVD Suite, Apt. #, etc. 3. Mailing Office Address 4943 E. BUSCH BLVD Suite, Apt. #, etc.	CR2E081 (11/10)
City & State TAMPA, FL, Zip Country Zip Country Country	4. Date Incorporated or Qualified To Do Business in Florida 09/23/2011 5. FEI Number 45-3303976 Not Applied For Not Applicable
33617 U.S.A 33617 U.S.A 7. Name and Address of Current Registered Agent	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
ZILLUR K, KHAM Street Address (P.O. Box Number is Not Acceptable) 4943 E. BUSCH BLVD Suite, Apt. #, Etc. City State Zip Code	300249439503 07/02/1301014007 **900.00
TAMPA 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the of Registered Agent REGISTERED AGENT MUST SIGN	Date 6/25/13
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at le Titles Name of Officers and/or Directors Street Address of Each Officer and/or Director Officer and/or Director PREHID TITLE ADDRESSED TO STREET ADDRESSED	City / State / Zip
REINSTAT	12-13 EMENT T. SCOTT
0. E-mail Address: RAHMANZILLUR 55@ SAHOD. COM (To be used for future annual report notification) 1. 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 take 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: 13 - 360 - 4105 Dayline Phone #	