PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
15 OCT -1 AM 10:13
TALLAHASSEE, FLORIDA

DOCUMENT # P14000094588

1. Corporation Name
Clean Sweep INC.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
764 LINDO LANE	764 LINDO LN.
Suite, Apt. #, etc	Suite, Apt. #, etc
Port St. Lucie Fl	Port St. Lucie
City & State	City & State
	Fl
Zip / Country	Zip / Country
34952 / St. Lucie	34952 / St. Lucie

4. Date Incorporated or Qualified To Do Business in Florida: 11-19-2014

5. FEI Number: 32-0455089 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED — $87.5 Additional Fee Applies if a Certificate of Status is Requested

7. Name and Address of Current Registered Agent

Name: Teresa D. Hire
Street Address (P.O. Box Number is Not Acceptable): 764 LINDO LN.
Suite, Apt. #, etc.
City: Port St. LUCIE Fl
State: FL
Zip Code: 34952

200277650212
10/01/15--01020--021 **50.00

200277650212
10/01/15--01020--020 **500.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Teresa D Hire — REGISTERED AGENT MUST SIGN
Date: 9-28-2015

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	Teresa Hire	764 LINDO LANE	Port St. LUCIE FL 34952
D	Teresa Hire	764 LINDO LANE	Port St. LUCIE FL 34952

REINSTATEMENT

2015-925

S. HAWKES
OCT 2 - A.M.
EXAMINER

10. E-mail Address: teresahire98@gmail.com (To be used for future annual report notification)

11. I certify that I am an officer or director of the reinvestor or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. 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: Teresa D. Hire