

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

17 DEC 20 11:11:26

DOCUMENT # P15000077928

1. Corporation Name

MBC Capital Investment Corp

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

6222 Kingbird Manor Dr

Suite, Apt. #, etc.

City & State

Lithia, FL

Zip

33547

Country

usa

3. Mailing Office Address

6222 Kingbird Manor Dr

Suite, Apt. #, etc.

City & State

Lithia, FL

Zip

33547

Country

4. Date Incorporated or Qualified

To Do Business in Florida 9-22-2015

5. FEI Number

47-5146267

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (11/10)

7. Name and Address of Current Registered Agent

Name

Jeffrey Herrington

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

6222 Kingbird Manor Dr

Suite, Apt. #, Etc.

City

Lithia

State

FL

Zip Code

33547

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

REGISTERED AGENT MUST SIGN

Date 11-9-17

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
PSD	Jeffrey Herrington	6222 Kingbird Manor Dr	Lithia, FL 33547

T MOORE
DEC 20 2017

10. E-mail Address: j.herrington@mbcconstruction.net

(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-9-17

Date

Daytime Phone #

SECURITY FEATURES INCLUDE TRUE WATERMARK PAPER, HEAT SENSITIVE ICON AND FOIL HOLOGRAM.

**MBC CAPITAL INVESTMENT CORP
DBA MBC INSPECTION & CONSULTING**

5117 WHISPERING LEAF TRL
VALRICO, FL 33596

1018

63-391/631

DATE 11-9-2017

CHECK 881228

PAY
TO THE
ORDER OF

Department of State

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\$ 750.00

Seven Hundred Fifty dollars & 00/100

DOLLARS



FIFTH THIRD BANK

FOR

MBC Cap. 101 P15000077928



[Signature]

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