PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

21 JAN 28 PM 4:09

DOCUMENT # P17000066029

1. Corporation Name
Brownstone Motors Corporation

700359160827

(REQUEST: (11/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
12336 Royal Saint George Dr	12472 Lake Underhill Rd
Suite, Apt. #, etc. 159	Suite, Apt. #, etc. 159
City & State Orlando Florida	City & State Orlando Florida
Zip 32828 Country USA	Zip 32828 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 07 | 14 | 2017

5. FEI Number 82-2156156 — 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: Tabitha Wilson

Street Address (P.O. Box Number is Not Acceptable): 12336 Royal Saint George Drive

Suite, Apt. #, Etc: N/A

City: Orlando | State: FL | Zip Code: 32828

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: Tabitha Wilson — Date: 1/27/2021
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
President & Owner	Tabitha Wilson	12336 Royal Saint George Dr. Ste 159	Orlando, FL 32828
		19-21	dcc 1/28/21

E-mail Address: Brownstone Motors 01 a@gmail.com
(To be used for future annual report notification)

I, Tabitha Wilson as officer or director of the applicant or trustee empowered to execute this application as provided for in F.S. 607.0403 or 617.0501, F.S., hereby sign this reinstatement application. The reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0501, F.S., and all taxes owed by the corporation have been paid. I further certify that 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: Tabitha Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #