PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 OCT 12 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P36299

1. Corporation Name

Friends of Israel Disabled War Veterans--
Beit Halochem, Inc.

Principal Place of Business	Mailing Address
419 Park Avenue South New York, New York 10016	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City, & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 11/14/91

5. FEI Number: 13-3392711 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
President	Susan Aberbach	Susan Aberbach Fine Art 41 East 57th Street	New York, NY 10022
Secretary	Michael Leichtling, Esq	Parker Chapin 1211 Avenue of Americas	New York, NY 10036
Chairman	Mike Cukier	7300 Radice Court, #803	Lauderhill, FL 33319
Executive Director	Mike Stoler	419 Park Ave. South	New York, NY 10016

REINSTATEMENT 97-98

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SE 10-14-98

8. Name and Address of Current Registered Agent

Mike Cukier
7300 Radice Court, #803
Lauderhill, FL 33319

9. Name and Address of New Registered Agent

Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Suite, Apt. #, Etc.:
City: Tallahassee | State: FL | Zip Code: 32301

CR2E040 (1/98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Allen B. Ikon — REGISTERED AGENT MUST SIGN — Date: 10/12/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. 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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Susan Aberbach — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (212) 689-3220 Daytime Phone #

SUSAN ABERBACH, PRESIDENT

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 870351 4301763

AUTHORIZATION : Patricia Pujet

COST LIMIT : $ 750.00

ORDER DATE : June 25, 1998

ORDER TIME : 2:21 PM

ORDER NO. : 870351-015

CUSTOMER NO: 4301763

CUSTOMER: Barbara Toffler, Legal Asst
PARKER CHAPIN FLATTAU & KLIMPL
PARKER CHAPIN FLATTAU & KLIMPL
1211 Avenue Of The Americas
17th Floor
New York, NY 10036

RECEIVED
98 OCT 14 PM 3:31
DIVISION OF CORPORATION

DOMESTIC FILING

NAME: FRIENDS OF ISRAEL DISABLED WAR VETERANS BEIT HALOCHEM, INC.

EFFECTIVE DATE:

XX ___ REINSTATEMENT

RECEIVED
98 OCT 12 PM 3:29
DIVISION OF CORPORATION

RESUBMIT
Please give original submission date as file date.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS: _____