

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

REINSTATEMENT

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

APPROVED
AND
FILED

98 NOV 19 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000010459**

1. Corporation Name

DOLPHIN INSULATION CO., INC.

Principal Place of Business

Mailing Address

7230 NW MIAMI CT.
UNIT 301
MIAMI FL 33193
US

915 FOLLY ROAD
#F2
CHARLESTON SC 29412

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

2. New Principal Office Address, If Applicable

4709 Crump Rd

3. New Mailing Office Address, If Applicable

PO Box 1430

Suite, Apt. #, etc.

28

Suite, Apt. #, etc.

PO Box 1430

City & State

Lake Hamilton, FL

City & State

Folly Beach, SC

Zip

33851

Country

USA

Zip

29439

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/09/1992

5. FEI Number

65-0364714

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
P	MINCEY, CHUCK	353 SHADONRACE LANE	FOLLY BEACH SC 29439

100002701721--8
-12/03/98-01061-022
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MINCEY, CHUCK W JR
7230 NW MIAMI CT.
UNIT 301
MIAMI FL 33193

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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)(f), 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:

Signature and Typed or Printed Name of Signing Officer or Director

11/16/98

Date

843 795-7103

Daytime Phone #

CR2E040 (9/98)

20PZ

*** DOLPHIN INSULATION***

915 FOLLY RD. SUITE F-2 CHARLESTON, SC 29412
PHONE: 1-800-440-1213 FAX: 1-800-440-1214

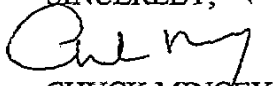
ZACK CALDWELL
DIVISION OF CORPORATIONS
ANNUAL REPORTS FILINGS
PO BOX 1500
TALLAHASSEE, FL 32302-1500

11/16/98

SIR,

ENCLOSED IS CHECK # 853 AMOUNT \$150.00 FOR DOLPHIN INSULATIONS' ANNUAL
FILING FEE. WE NEVER RECEIVED THE FIRST NOTIFICATION(SEE ATTACHED).
THANK YOU FOR YOUR HELP.

SINCERELY, ^


CHUCK MINCEY

DOLPHIN INSULATION MAILING ADDRESS:

DOLPHIN INSULATION
PO BOX 1430
FOLLY BEACH, SC 29439-1430