PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT 2000-01

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 MAR 30 PM 4:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P93000026549

1. Corporation Name

RIVERTOWN, INC.

2. Principal Office Address	**3.** Mailing Office Address
485 N. KEPLER RD.	3619 ROYAL FERN CIRCLE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DELAND, FL. 32724	City & State: DELAND, FL.
Zip / Country: VOLUSIA	Zip: 32724 / Country: VOLUSIA

00-01

4. Date Incorporated or Qualified To Do Business in Florida: 04/12/93

5. FEI Number: 59-3170262 ☐ 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: MICHAEL W. ERNEST

Name: MICHAEL W. ERNEST

Street Address (P.O. Box Number is Not Acceptable): 3619 ROYAL FERN CIRCLE

Suite, Apt. #, Etc.

100003859051--7
-04/04/01--01073--009
****300.00 ****300.00

City: DELAND FL. | State: FL | Zip Code: 32724

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: Michael W Ernest Date: 3/12/01
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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-	MICHAEL W. ERNEST	3619 ROYAL FERN CIRCLE	DELAND FL. 32724

2000-01 MWE MWE

10. 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: Michael W Ernest 3/12/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MARCH 6,2001

KATHY ASHTON

THIS LETTER IS IN REGUARD TO OUR TELEPHONE CONVERSATION ON MARCH 5,2001, WE DID NOT RECEIVE OUR FILING FEE COPY FOR 2000 DUE TO THE FACT THAT IS WAS SENT TO THE WRONG ADDRESS. ENCLOSED IS A CHECK IN THE AMOUNT OF $300.00 TO REINSTATE RIVERTOWNS CORPORATE STATUS.

THANK YOU

RIVERTOWN INC.
485 N. KEPLER RD.
DELAND FL. 32724
PHONE 904 740 1973

DOCUMENT# P93000026549

CK# 3506
3-6-01