PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

EL ODIDA DEDADIMENT OF STATE								•	E	511 E.D		
CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			-	FILED 08 APR 21 AM II: 08					
						1			UB APK	(21 AH II:	80	
DOCUMENT # P93000028249 1. Corporation Name RAINEY INVESTMENT PROPERTIES, INC.							JR.		SECRET, TALLAHA	AR'I UL STAT SSEE, FLORIU	E DA	
							BEINSTATEMENT 05-08					
2. Principal Office Address - No P.O. Box # 3. M.				failing Office Address			4 0 04/21	0 01 2 /08~-01	4391: 004012	844 *** **1200.00		
25-I MA	SHES SAI	ND ROAD	POST OF	POST OFFICE BOX 648					2E081 (12/07)			
Suite, Apt	#, etc.	_	Suite, Apt. #,	Suite, Apt. #, etc.			4. Date Incorporated or Qualified					
City & State	9	·-·	City & State	City & State				To Do Business in Florida APRIL 29, 1993				
PANAC	EA, FL		PANACE	PANACEA, FL			5. FEI Number Applied For 59-3186839 Not Applicable			ole		
Zip	Country		Zip		Country	7				Additional Fee requ	ired	
32346		US 7. Name and Address	32346		US	_	CENTITIONTE	OF OTATOODS	for	r a Certificate of Statu	15	
7. Name and Address of Current Registered Agent Name							The rei	instatomor	nt foo is imp	and event in		
RAINEY, DENNETT I. Street Address (P.O. Box Number is Not Acceptable)							The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not					
25-I MASHES SAND ROAD												
Suite, Apt.	. #, Elc.						receive	ed and red		e reinstatement		
City PANACEA					State Zip Code 32346		iee be	waived.			ŀ	
8. I, being Signature o Registered	of	registered appent of the a	bove named corpo De l REGISTERED AG	net	t RAME.		igations of section	on 607.0505 o	1617.0503, F.S.	09	_	
9. Names	s and Street Ad	dresses of Each Officer			· · · · · · · · · · · · · · · · · · ·	at leas	st 3 directors)				┥	
Titles	Name of Officers and/or Directors			Street Address of Eacl Officer and/or Directo				City / State / Zip				
Р	RAINEY, DENNETT I.			POST OFFICE BOX 648			PANACEA, FL 32346					
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this re owed	instatement app by the corporati	fficer or director or the re olication, the reason for d on have been paid and the rue and accurate, and m	issolution has been ne names of individ	eliminated, uals listed o	the corporate name satis n this form do not qualify	sfies the	he requirements exemption cont	of section 607	.0401 or 617.04(01, F.S., that all fees		
SIGNA		//			tt I. Rainey, Pres	iden	t #11	1/09	850-984-9		1	
i	sic	MATURE AND TYPED OR	PRINTED NAME OF	SIGNING OFF	ICER OR DIRECTOR			/Date	Dayti	me Phone #		