

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 DEC 18 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Bayport Tile Company, Inc.

2. Principal Office Address

3269 7th Street

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34237

Country

USA

3. Mailing Office Address

3269 7th Street

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34237

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

12/15/1993

5. FEI Number

65-0454902

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

Timothy Richards

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

3269 7th Street

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34237

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

REGISTERED AGENT MUST SIGN

Date 11-20-2000

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
P,T,S	Timothy Richards	3269 7th Street	Sarasota, FL 34237
			500003521895--2 -01/03/01--01035--016 ****150.00 ****150.00

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:

Timothy Richards

Timothy Richards

11-20-2000

(941)365-4309

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



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3269 7th Street Sarasota, FL 34237 Tel.941-365-4309 / Fax 941-365-7203

December 14,2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Bayport Tile Company, Inc.
Ref. Number: P93000086715

In reference to your letter number: 400A0061899

We are not planning on revoking the dissolution of Bayport Tile Inc. and hereby release the name. We are the same individuals that have Bayport Tile Company, Inc. Please allow us to reinstate Bayport Tile Company, Inc.

If you have any questions, please call (941) 365-4309.

Thank You,

A handwritten signature in black ink, appearing to read 'Tim Richards', is written over a horizontal line.

Tim Richards
President