PLEASEREADALLINSTRUCTIONSBEFORECOMPLETINGTHISFORM.

FILED

04 APR 16 AM 8:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION REINSTATEMENT

FLORIDADEPARTMENTOFSTATE
SecretaryofState
DIVISIONOFCORPORATIONS

DOCUMENT# P94000010986

1. CorporationName D + D Racing Enterprises, Inc.
8150 Lone Star Rd #3
Jax FL 32211

REINSTATEMENT 98-04 - fld effective

2. PrincipalOfficeAddress	3. MailingOfficeAddress
8150 Lone Star Rd	Same
Suite,Apt.#,etc. #3	Suite,Apt.#,etc.
City&State Jax FL	City&State
Zip 32211 Country USA	Zip Country

4. DateIncorporatedorQualified ToDoBusinessinFlorida 2/4/94 2/1/94

5. FEINumber 59-3220425 AppliedFor NotApplicable

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

7. Name and Address of Current Registered Agent

Name H. Bruce Burden Jr

StreetAddress(P.O.BoxNumberisNotAcceptable) 8150 Lone Star Rd

500032513815
04/13/04--01019--015 **165.00

Suite,Apt.#,Etc. #3

City Jax [redacted] State FL ZipCode 32211

8. I,beingappointedtheregisteredagentofthecorporationnamedabove,amfamiliarandacceptmyobligationsofsection0.0505or1.050,F.S.

Signatureof RegisteredAgent H. Bruce Burden
REGISTEREDAGENTMUSTSIGN

Date 4/10/04

CR2E081(01/04)

9. NamesandStreetAddressesofEacOfficerand/orDirector(Floridanonprofitcorporationsmustlistatleastdirectors)

Titles	Nameof Officers and/or Directors	StreetAddressofEac Officer and/or Director	City/State/Zip
Dir.	Marylou Burden	[redacted] 474 Papaya Ct	Jax FL 32225
Of.	H. Bruce Burden Jr	474 Papaya Ct	Jax FL 32225

10. Icertifytatlamanofficerordirectororterecelerortrusteeempoeredtoeecutetisapplicationasproidedforin capter0or1,F.S.Ifurtercertifytatenfiling tisreinstatementapplication,tereasonfordissolutionasbeeneliminated,tecorporatenamesatisfiestere uirementsofsection0.0401or1.0401,F.S.,tatallfees oedbytecorporationaebeenpaidandtenamesofindiidualslistedontisformdonot ualifyforaneemptionunders ection11.0()(i), F.S. Teinformationindicated ontisapplicationistrueandacedrate,andbysignaturesallaetesamelegaleffectasifmadeunderoat.

SIGNATURE: H. Bruce Burden 4/10/04 904-724-5588
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — DaytimePone#