

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT #

1. Corporation Name

994000015438

THREE SEVEN FIVE, INC.

REINSTATEMENT 00-02

2. Principal Office Address 2709 W. Cary Street Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 14507 Suite, Apt. #, etc.	
City & State Richmond, Virginia		City & State Richmond, Virginia	
Zip 23220	Country USA	Zip 23221	Country USA

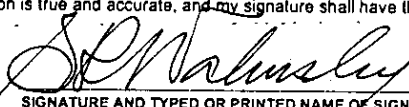
4. Date Incorporated or Qualified To Do Business in Florida		02/25/94
5. FEI Number 65-0469185	Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent			
Name	S.P. WALMSLEY		
Street Address (P.O. Box Number is Not Acceptable)	1500 EAST RAILROAD AVENUE		
Suite, Apt. #, Etc.	P.O. B 12		
City	State	Zip Code	
BOCA GRANDE	FL	33921	

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***1050.00 ***1050.00

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	Date
	8/06/02
REGISTERED AGENT MUST SIGN	

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
Pres	S.P. WALMSLEY	1500 EAST RAILROAD Ave	Boca Grande, FL 33921
Dir	S.P. Walmsley	1500 East Railroad Ave	Boca Grande, FL 33921
S	S.P. Walmsley	1500 East Railroad Ave	Boca Grande, FL 33921
V	R.W. McDaniel	2709 W. Cary Street	Richmond, Va 23220
Dir	R.W. McDaniel	2709 W. Cary Street	Richmond, Va 23220

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:	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
	S.P. WALMSLEY
Date	Daytime Phone #
8/06/02	804-282-9015

CR2E081 (9/01)

8/8/02