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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
99 JUN 25 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000028214 (2)

1. Corporation Name
SESQUIPEDALIAN, INC.

Principal Place of Business	Mailing Address
~~1559 NW 97 Ter~~ ~~Coral Springs, FL~~ ~~33071 US~~	~~1559 NW 97 Ter~~ ~~Coral Springs, FL 33071~~ ~~US~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
4927 NW 85 Rd	1401 E. ATLANTIC BLVD	04/11/94
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number: 65-0484040 ☐ Applied For ☐ Not Applicable
City & State: Coral Springs FL	City & State: Pompano Beach FL	6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status
Zip: 33067 Country: USA	Zip: 33060 Country: USA ~~Brazil~~	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/VP	Janet M. Gallo	4927 NW 85 Rd	Coral Springs, FL 33067
S	Roger Gallo	4927 NW 85 Rd	Coral Springs, FL 33067
			400002927694--2 -07/09/99--01087--007 ****308.75 ****308.75
			LS

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
(1359) GALLO, ROGER 1559 N.W. 97 Ter Coral Springs, FL 33071	Name: JANET GALLO Street Address (P.O. Box Number is Not Acceptable): 4927 NW 85 Rd Suite, Apt. #, Etc. City: Coral Springs State: FL Zip Code: 33067

CR2E081 (12/98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Janet M. Gallo (REGISTERED AGENT MUST SIGN) Date: 6/22/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. 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: Janet M. Gallo Janet M Gallo 6/22/99 954 757 3508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

re. Sesquipedalian Inc
P94000028214 (x) 6/22/99

Dear madam or Sir

I spoke to a gentleman on the phone, Tyrone, and he said I should write you a letter. I have never forgotten to pay you before. I moved in Dec 1997 and never received a renewal form and I just didn't think about it since I got nothing in the mail. My leasing agent just told me this week.

I have very little money as I am a single parent. I never forget to file before and I never will again.

Please, the man I spoke to, Tyrone, said maybe you could charge me $300.00 this time only as a first time slip up. A one time only help. Business is very slow.

Please reinstate this corporation and accept the $300.00 check. I never got the 1998 notice.

Thank you,

Joan M. Sallo
pres/ Sesquipedalian Inc
954 757 3508
1401 E Atlantic Blvd
Pompano Beach, FL
33060