PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 APR 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000030680

1. Corporation Name

Jack's Aero, Inc.

Principal Place of Business / Mailing Address

Same

310 Ponte Vedra Boulevard
Ponte Vedra Beach, Florida
32082

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
April 15, 1994

5. FEI Number
59-3245774
Applied For
Not Applicable

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

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/S/D	John B. Towers	310 Ponte Vedra Blvd.	Ponte Vedra Beach, FL 32082

300002513803--0
05/06/98--01094--013
***1050.00 ***1050.00

REINSTATEMENT 4-98

4-29-98

8. Name and Address of Current Registered Agent

John B. Towers
310 Ponte Vedra Boulevard
Ponte Vedra Beach, FL 32082

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

300002513803--0
05/06/98--01094--014
******8.75 ******8.75

Suite, Apt. #, Etc

City State: FL Zip Code

10. Having been 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 X John Towers REGISTERED AGENT MUST SIGN Date 4/28/98

11. This corporation owes or has paid 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 of the reporter 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: X John Towers