

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # P94000045899

1. Corporation Name

KLM PRODUCTS, INC.

Principal Place of Business

2215 OSCEOLA COURT
 WINTER PARK FL 32789
 US

Mailing Address

PO BOX 2201
 WINTER PARK FL 32780
 US

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

2. New Principal Office Address, If Applicable

215 OSCEOLA CT.
 Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

215 OSCEOLA CT.
 Suite, Apt. #, etc.

City & State

WINTER PARK, FL

Zip 32789

Country

USA

City & State

WINTER PARK, FL

Zip

32789

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida

06/13/1994

5. FEI Number

59-3253293

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	MATTEO, FRANK R	9 SHINGLE OAK DR	VOORHEES NJ
VP	LAINO, VINCENT A	302 FALL CREEK DR	RICHARDSON TX
ST	KIRK, WILLIAM W.	215 OSCEOLA COURT	WINTER PARK FL
			200002959642--4
			-08/13/99--01094--004
			****900.00 ****900.00

8. Name and Address of Current Registered Agent

KIRK, WILLIAM W.
 215 OSCEOLA COURT
 WINTER PARK FL 32789

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

William W. Kirk

REGISTERED AGENT MUST SIGN

Date

7/22/99

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 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:

William W. Kirk
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 WILLIAM W. KIRK

Date

Daytime Phone #

7/22/99 407-645-2363

CR2E040 (9/98)