PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

97 AR

APPLICATION FOR REINSTATEMENT

FL[illegible]EPARTMENT OF STATE
[illegible]ndra B. Mortham
[illegible]tary of State
[illegible]ION OF CORPORATIONS

(1)

FILED
97 DEC -4 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078271

1. Corporation Name

NORTH FLORIDA CONCRETE SERVICES, INC.

Principal Place of Business	Mailing Address
1241 WEST THARPE ST #G7 TALLAHASSEE FL 32303 US	1109-C WEST THARPE ST TALLAHASSEE FL 32303

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
Suite, Apt. #, etc.: 1241 West Tharpe St. C-4	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Same as new Address
Zip: 32303 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 10/25/1994

5. FEI Number: 59-3280378 ☐ 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	SINGLETON, PATRICIA A	~~734 W THARPE~~ RR 3, Box 719L	~~TALLAHASSEE FL~~ Havana, FL 32333

000002371250--8
-12/12/97--01110--004
****173.00 ****179.00

8. Name and Address of Current Registered Agent

SINGLETON, PATRICIA A
734 W THARPE ST
TALLAHASSEE FL 32303

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

CR2E040 (8/97)

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: Patricia A. Singleton Date: 11-5-97
REGISTERED AGENT MUST SIGN

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: Patricia A. Singleton 11-5-97 850-385-4623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(2)

To: Trevor

From: Pat Singleton

This letter is to inform you that I didn't rec'd the annual report that was mailed to me. Please reinstate my corporation.

Enclosed please find a check in the amount of $ 179.00 for reinstatement

Thanks

Patricia A. Singleton
North Florida Concrete Services, Inc.