PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED
AM
FILED

98 SEP 10 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000085752

1 Corporation Name

THE NOVA MARKETING GROUP, INC.

Principal Place of Business / Mailing Address

~~2211 Northeast 40th Court~~
~~Lighthouse Pointy FL 33064~~

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

REINSTATEMENT 9-10-98

2 New Principal Office Address, If Applicable	3 New Mailing Office Address, If Applicable
707 S.E. Third Avenue	707 S.E. Third Avenue
Suite, Apt. #, etc. Suite 600	Suite, Apt. #, etc. Suite 600
City & State Ft. Lauderdale, FL	City & State Ft. Lauderdale, FL
Zip 33316 Country USA	Zip 33316 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: November 18, 1994

5. FEI Number: 65-0540399 ☐ 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/D/T	Gary R. Rowe	9 Centerville Drive	Salem, NH 03079
D/ V/ /S	Edward Oliveira	2211 N.E. 40th Court	Lighthouse Point, FL 33064
			600000263910 6----4 09/15/98 01006-008 ****900.00 ****900.00

9-10-98

8. Name and Address of Current Registered Agent

Edward Oliveira
2211 N.E. 40th Court
Lighthouse Point, FL 33064

9. Name and Address of New Registered Agent

Name: Fredric C. Buresh, Esquire
Street Address (P.O. Box Number is Not Acceptable): 707 S.E. Third Avenue
Suite, Apt. #, Etc.: Suite 600
City: Ft. Lauderdale State: FL Zip Code: 33316

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: [signature] REGISTERED AGENT MUST SIGN Date: 9/9/98

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: Gary R. Rowe, President 9/8/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #