

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

01 JUL -2 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000052809

1. Corporation Name

JAMES & COMPANY AT MAR LAGO, INC.

2. Principal Office Address

600 Corporate Drive

3. Mailing Office Address

Suite, Apt. #, etc.

Suite 512

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, Florida

City & State

Zip

33334

Country

U.S.

Zip

Country

REINSTATEMENT 98-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

07/10/1995

5. FEI Number

65-0597274

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

AMERICAN INFORMATION SERVICES, INC.

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

One S.E. 3rd Avenue

Suite, Apt. #, Etc.

28th Floor

City

Miami

State
FL

Zip Code
33131

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

AMERICAN INFORMATION SERVICES, INC.

Angelica M. Calabrese

Assistant Secretary

Date

6/27/01

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	Bernd Uellendahl	600 Corporate Dr., Suite 512	Ft. Lauderdale, FL 33334
DS	Sven Uellendahl	600 Corporate Dr., Suite 512	Ft. Lauderdale, FL 33334

10. 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:

Sven Uellendahl

Sven Uellendahl, Secretary

6/27/01

(954) 492 9191

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #