PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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97 AUG 18 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # P95000054768

1. Corporation Name: CORP-LINK CORPORATION

H97000013561

Principal Place of Business	Mailing Address
8324 N.W. 40TH COURT CORAL SPRINGS, FL 33065	8324 N.W. 40TH COURT CORAL SPRINGS, FL 33065

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

REINSTATEMENT 96-97

2. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable
2898 UNIVERSITY DRIVE	2898 UNIVERSITY DRIVE
Suite, Apt. #, etc.: SUITE 70	Suite, Apt. #, etc.: SUITE 70
City & State: CORAL SPRINGS, FL	City & State: CORAL SPRINGS, FL
Zip: 33065 County: BROWARD	Zip: 33065 County: BROWARD

4. Date Incorporated or Qualified To Do Business in Florida: 8/25/95

5. FEI Number: 65-0594358 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED [X] (See 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/D	MATTHEW P. DWYER	2898 UNIVERSITY DRIVE, # 70	CORAL SPRINGS, FL 33065

8/18/18

8. Name and Address of Current Registered Agent

RICHARD R. DWYER
8324 N.W. 40TH COURT
CORAL SPRINGS, FL 33065

9. Name and Address of New Registered Agent

Name: MATTHEW P. DWYER
Street Address (P.O. Box Number is Not Acceptable): 2898 UNIVERSITY DRIVE
Suite, Apt. #, Etc.: SUITE 70
City: CORAL SPRINGS | State: FL | Zip Code: 33065

10. I being appointed registered agent of the above named corporation, will further with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent (If Changing): REGISTERED AGENT MUST SIGN — Date: AUGUST 18, 1997

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [ ] No [X] (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: _____ 8/18/97 (954) 345-4550
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY CORPORATION OR DIRECTOR — Date — Daytime Phone #
MATTHEW P. DWYER, PRESIDENT/DIRECTOR

H97000013561

PHONE: (954) 763-1200

JAMES M. SCHNEIDER, ESQ. - FL BAR # 214338
ATLAS, PEARLMAN, TROP & BORKSON, P.A.
200 EAST LAS OLAS BOULEVARD, SUITE 1900

AUG-18-97 13:55 FROM:AtlasPearlmanTropBorkson ID:8547887800 PAGE 2/2

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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4000

FROM: ATLAS, PEARLMAN, TROP & BORKSON, P.A. ACCT#: 076247002423
CONTACT: BEVERLY F BRYAN
PHONE: (954)763-1200 FAX #: (954)766-7800

NAME: CORP-LINK CORPORATION
AUDIT NUMBER.....H97000013561
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