

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000058714

1. Corporation Name

MTD WORLDWIDE, INC

2. Principal Office Address - No P.O. Box #

1710 TIMBEREDGE DR

Suite, Apt. #, etc.

City & State

DELAND FL

Zip

32724

Country

USA

3. Mailing Office Address

1213 BEECHDALE CT

Suite, Apt. #, etc.

City & State

DELTONA FL

Zip

32725

Country

USA

7. Name and Address of Current Registered Agent

Name JANET FUGATE

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

1213 BEECHDALE CT

Suite, Apt. #, Etc.

City DELTONA

State

FL

Zip Code

32725

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

Janet Fugate

REGISTERED AGENT MUST SIGN

Date 10-23-08

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
P	JOHN FLAHERTY	1710 TIMBEREDGE DR	DELAND, FL 32725
S	SALLY WARREN	2745 REBECCA LN	ORANGE CITY, FL 32763

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 contained in Chapter 119, 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:

John Flaherty

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-24-08

Date

789-3205

Daytime Phone #

FILED

08 OCT 27 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200137322172
10/27/08--01046--019 **900.00

REINSTATEMENT

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

1995

5. FEI Number

593327391

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.